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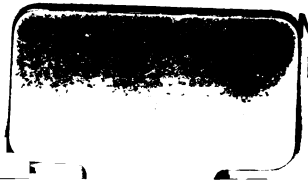

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MANUAL

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FOR THE

MEDICAL DEPARTMENT.

COMPILED UNDER THE DIRECTION OF THE SURGEON GENERAL.

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This Manual for the Medical Department is published for the information and guidance of all concerned; it will not be modified except by specific authority given in each case.

ELIHU ROOT,
Secretary of War.

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MANUAL FOR THE MEDICAL DEPARTMENT.

DUTIES OF THE MEDICAL DEPARTMENT.

See A. R. 1392.

MEDICAL OFFICERS.

APPOINTMENT OF MEDICAL OFFICERS.

See A. R. 1394. Candidates to be examined by a board.
A. R. 1395. No allowance made for expenses of candidates.

1. Appointments of assistant surgeons are made by the President, after the applicant has passed a successful examination before a Medical Examining Board and has been recommended by the Surgeon General. Permission to appear before the board is obtained by letter to the Secretary of War, which must be in the handwriting of the applicant, giving the date and place of his birth and the place and State of which he is a permanent resident, and inclosing certificates based on personal acquaintance from at least two reputable persons as to his citizenship, character, and habits. The candidate must be a citizen of the United States, between twenty-two and twenty-nine years of age, of sound health and good character, and a graduate of some regular medical college, in evidence of which his diploma will be submitted to the board. The scope of the examination will include the morals, habits, physical and mental qualifications of the candidate, and his general aptitude for service; and the board will report unfavorably should it have a reasonable doubt in any of these particulars.

2. The physical examination must be thorough, and each candidate will be required to certify *that he labors under no mental or physical infirmity or disability which can interfere with the efficient discharge of any duty which may be required.* Errors of refraction, when not excessive, when unaccompanied by ocular disease, and when they can be corrected by appropriate glasses, are not causes for rejection.

3. The mental examinations are conducted by both written and oral questions, upon—

(*a*) The elementary branches of a common-school education, including arithmetic, the history and geography of the United States, physics, general literature, and ancient and modern history. Candidates claiming special knowledge of the higher mathematics, ancient or modern languages, drawing, analytical chemistry or branches of natural science, will be examined in these subjects as accomplishments, and will receive due credit therefor according to their proficiency.

(*b*) Professional branches, including anatomy, physiology, chemistry, hygiene, pathology and bacteriology, therapeutics and materia medica, surgery, practice of medicine, obstetrics, and the diseases of women and children.

(*c*) Examinations in medicine and surgery will also be conducted at the bedside and on the cadaver.

4. Hospital training and practical experience in medicine, surgery, and obstetrics are essential. Candidates must present evidence that they have had at least one year's hospital experience, or the equivalent of this in practice.

5. To save unnecessary expense to candidates, those who so desire may have, when practicable, a preliminary physical examination and an examination in the elementary branches of a common-school education by a medical officer stationed most conveniently for this purpose, who will act under instructions from the Medical Examining Board.

6. The merits of the candidates in each of the several branches, and also their relative merit as evinced by the results obtained from the entire examination, will be reported by the board, and in accordance with this report approved candidates will be appointed to existing vacancies, or to such as may occur within two years thereafter. A candidate failing in one examination may be allowed a second after one year, but not a third.

ARMY MEDICAL SCHOOL.

See A. R. 468. Organization of.
A. R. 869. Inspection of.

7. The course of instruction covers a period of five months and is given annually at the Army Medical Museum, in Wash-

ington, D. C., commencing on the first Monday of November. It includes lectures on and practical instruction in—

(*a*) The duties of medical officers in war and peace.

(*b*) Military surgery, the care of the wounded in time of war, and hospital administration.

(*c*) Military hygiene.

(*d*) Military medicine.

(*e*) Microscopy, sanitary and clinical; pathological histology, bacteriology, and urinology.

(*f*) Hospital Corps drill, and first aid to wounded.

8. By permission of the Surgeon General, medical officers of the Army who desire to avail themselves of the course of instruction, and who are stationed in or near the city of Washington, or who have a leave of absence which enables them to attend the course, may be admitted as pupils.

9. At the termination of the course of instruction the student officers will be examined by the several professors, and their relative proficiency in each branch will be reported by the president of the faculty to the Secretary of War, through the Surgeon General.

10. (*a*) The president of the faculty will be responsible for the discipline of the school.

(*b*) The junior professor will act as secretary, and will be responsible for all property pertaining to the school.

(*c*) A faculty meeting will be held in the office of the secretary on the first Monday of each month from October to April, inclusive, and whenever called by the president of the faculty or the Surgeon General.

(*d*) Resolutions adopted by the faculty relating to the course of instruction, the purchase of books and instruments, etc., will be submitted to the Surgeon General for his approval.

(*e*) The president of the faculty will submit to the Surgeon General on or before the first day of May of each year, a detailed report of the condition of the Army Medical School, including an account of the instruction given and the proficiency of the several student officers, as shown by an examination made by each professor at the termination of his course.

(*f*) The hours of instruction will be from 9 to 12 a. m., and from 1 to 4 p. m., daily, during the months of November, December, January, February, and March, inclusive, with the

exception of Saturdays, Sundays, legal holidays, and the week commencing December 25.

(*g*) Student officers will be required to be present during the hours designated, unless specially excused by the president of the faculty or by orders from the War Department.

(*h*) When necessarily absent on account of sickness or other emergency, student officers will, as soon as practicable, send a written statement to the secretary of the faculty, explaining the reason for such absence.

(*i*) The laboratories and library of the Army Medical School will be open for the use of student officers during the hours of instruction designated.

(*j*) Student officers will be held strictly accountable for all instruments and apparatus issued to them for their personal use during the course of instruction, and for any loss or injury to books or apparatus belonging to the Army Medical School, when such loss or injury is due to carelessness or neglect.

(*k*) Student officers in the Army Medical School, during the hours of instruction, will wear the undress uniform of their grade, except when engaged in laboratory work, when a black cambric laboratory gown may be worn.

ASSIGNMENT OF MEDICAL OFFICERS.

See A. R. 738. Made by order of the Secretary of War.

11. The number of medical officers assigned to duty at a post will, when practicable, be as follows: For a post having as its garrison a full regiment, three; for a post having as its garrison four companies and regimental headquarters, two; for a post having as its garrison less than four companies, one.

12. The Surgeon General will recommend the assignment, as attending surgeons in the principal medical centers of the United States, of medical officers who have not yet passed their examinations for promotion to a majority, and, so far as may be practicable, in the order of their seniority. These details will be made for one year only, in order that as many medical officers as possible may be enabled to avail themselves of the opportunities thus offered for making themselves familiar with the practice of the leading physicians and surgeons in this country, and of attending medical lectures,

meetings of medical societies, etc. At the end of this tour of duty medical officers are required to make a detailed report to the Surgeon General, showing how much of their time has been occupied by their official duties, and to what extent they have availed themselves of the advantages offered for professional advancement.

13. Medical officers assigned to duty as attending surgeons will select an office hour between the hours of 10 a. m. and 4 p. m., and will remain in their offices during this hour, unless called away by an urgent professional engagement. They will inform all officers on duty, and all retired officers living in the city, of their residence address, of their office hour, and of any changes made in the same; also, of any leave of absence which may be granted them, and of the address of the physician who will attend to their duties while they are absent. They will be careful not to allow anything to interfere with the proper performance of their duties as attending surgeon and examiner of recruits.

EXAMINATION OF MEDICAL OFFICERS FOR PROMOTION.

14. Examinations for promotion will be made by examining boards under the following heads: (1) Physical conditon; (2) character and professional efficiency.

(1) When the board finds an officer physically incapacitated for service, it will conclude the examination by finding and reporting the cause which, in its judgment, has produced his disability, and whether such disability was contracted in the line of duty. For the purpose of this inquiry the proceedings of the board will conform to those of a retiring board.

(2) When the board finds an officer physically capable, the examination will proceed under the second head. Any evidence submitted as to character will be carefully considered, and such action will be taken as, in the opinion of the board, the case may require; provided, that an adverse finding shall not be entered until the officer shall have been fully heard in his own behalf. The professional examination of officers not found physically disqualified will be proceeded with by written questions of a practical character, including the following topics:

Examination of Lieutenants.—(1) First aid and transportation of wounded; (2) hospital and hospital corps administration; (3) Army Regulations, so far as they relate to the Medical Department or to the medical officer as an officer of the Army; (4) general and military hygiene; (5) recent progress in medicine and surgery; (6) subjects in which the officer may have been conditioned at his examination for appointment.

Examination of Captains.—(1) Army Regulations, so far as they relate to the Medical Department or to the medical officer as an officer of the Army; (2) general and military hygiene; (3) clinical medicine, and recent progress in etiology, pathology, and therapeutics; (4) surgery and gynecology, including new operative procedures.

The board will report its recommendation of an officer for promotion in the following form: "We find that ——— has the physical, moral, and professional qualifications to perform efficiently all the duties of the grade to which he will next be eligible, and recommend him for promotion thereto."

The questions and answers of the written examination will be transmitted with the proceedings of the board. Each record must be signed by every member and by the recorder, and must show the concurrence or nonconcurrence of each member in the opinion of the board. When the board fails to recommend a candidate for promotion, the record should state the cause of such failure. The proceedings will be forwarded to the Surgeon General for the final action of the Secretary of War.

CHIEF SURGEONS OF MILITARY DEPARTMENTS.

See A. R. 196. Detailed by the Secretary of War.
A. R. 1465. Inspection of posts by.

15. Chief surgeons and other medical officers, when ordered to make an inspection of a post, will examine the members of the Hospital Corps as to their efficiency in the ambulance and litter bearers' drill, and the methods of rendering first aid to the wounded.

16. Chief surgeons will keep the following record books: Letters received, letters sent, indorsements, and orders. They will also keep and turn over to their successors complete

files of circulars, requisitions, records of medical officers, returns of the Hospital Corps, and reports received.

DUTIES OF MEDICAL OFFICERS IN THE FIELD.

17. The chief surgeon of a corps is held responsible for the proper and effective management of the medical service of the command.

He should keep a register of the medical officers and hospital corps, making assignments and issuing orders and instructions with the approval of and "By order" of the Major General Commanding, if authorized to do so. He should make himself acquainted with the sanitary conditions affecting the troops, the efficiency of the field hospitals and of the ambulance companies, and should call for weekly reports of sick and wounded and of the personnel and means of transportation of the Hospital Corps. All reports and papers not requiring special action should be checked off and receive the stamp of his office before transmittal. Such papers include personal reports of medical officers, monthly reports of sick and wounded, of the Hospital Corps and of the hospital fund, and sanitary reports from chief surgeons of brigades and divisions; also the lists of wounded called for after an engagement. A copy of the action taken on all papers referred to him or forwarded by him should be made in an indorsement book. Such papers include those relating to resignations, leave of absence or discharge on account of disability, requisitions for medical and hospital and Hospital Corps supplies, and all recommendations or complaints referring to the medical service or affecting the health and well-being of the troops. Copies of orders and letters should be made and placed on file, and all circulars or orders from the Surgeon General or the Chief Surgeon of the Army should be published without delay to the chief surgeons of divisions.

Prior to a movement, the chief surgeon should verify, by personal inspection, the condition of the hospitals and of the Hospital Corps companies and their trains, and should make all the arrangements needful for the probable exigencies of the campaign. He should see that the assignments by chief surgeons of divisions to positions on the operating staff of the field hospitals include the best surgical skill of each division.

On the march he should accompany the staff and acquaint himself with the topography of the country; and when an engagement is imminent he should indicate to chief surgeons of divisions the localities best suited for the establishment of the field hospitals. He should inspect these from time to time, and exercise general supervision over the first-aid and ambulance stations and the movement of the wounded to the hospitals. He should also supervise the movement of sick and wounded to the base or general hospitals, providing transportation and detailing medical officers and attendants for their care. When absent on such duties he should leave a competent medical officer with the staff to represent him and to inform him of important changes in the military conditions. The Commanding General should be kept informed of the work of the Medical Department, and should always be consulted in matters of importance.

(*a*) The chief surgeon of a division supervises the medical and Hospital Corps service of the division. He should transmit official reports and papers, with the stamp of his office if routine in character, or with his views indorsed thereon if the subject appears to call for this action. He should have frequent personal communication with the chief surgeon of the corps, and should endeavor to carry out the views of the latter on behalf of the troops. His usual position is with the staff, but he should make frequent visits to the division hospital and the ambulance company to oversee their work. He should detail one medical officer in rotation as officer of the day, who, on the march, should keep him informed of any noteworthy occurrence, and who, in camp, should visit each regiment of the division to report on its hygienic and sanitary conditions. Before an engagement he should see that the field hospital is properly established and that the operating surgeons and their assistants are at their proper stations. During and after the engagement he should supervise the movement of the wounded from the ambulance stations to the hospital.

(*b*) The chief surgeon of a brigade is the adviser of the brigade commander in all medical and sanitary questions concerning the command. He should call for a weekly (or daily, as may be required) report of sick and wounded from regimental surgeons and of the detailed members of the Hospital

Corps on duty with them. He should forward the formal reports of these surgeons, and promulgate orders from brigade and higher authorities. He should keep careful watch over the health of the brigade, reporting in writing from time to time, as may be required, and consulting in emergencies with the chief surgeon of the division. During and after an engagement he should supervise the work at the first-aid stations and the removal of the wounded to the ambulance stations, unless on account of his superior ability he has been assigned to duty at the operating tables, in which case a competent officer should be detailed to represent him temporarily on the staff of the brigade.

(*c*) The regimental surgeon is, in sanitary matters, the adviser of the regimental commander. On the march and in camp he should examine the sick with a view to their proper treatment and disposition. He is responsible for any unexpendable medical and hospital property issued for the use of the regiment. His supplies of medicines, etc., should be renewed by requisition on the surgeon in charge of the hospital. Members of the Hospital Corps on duty with the division are detailed to duty with him. Daily, after sick call, he should send a morning report of sick and wounded and of the Hospital Corps to the regimental commander, with a duplicate to the chief surgeon of the brigade. He should keep, as a register of sick and wounded, a retained copy of the monthly report forwarded through the offices of chief surgeons to the Surgeon General; cases treated in the division field hospital should be borne on this report as completed. (See paragraph 162.) He should forward monthly, or when his official station has been changed, a personal report on a memorandum slip. After every engagement a list of wounded of the command should be forwarded. If the regimental surgeon is, by order of the chief surgeon, placed on temporary special duty, the senior medical officer with the command will perform the duties of the regimental surgeon. During an engagement he should serve at the first-aid stations.

(*d*) The surgeon in charge of a division hospital is responsible for the care of the sick and wounded on the march and in camp, and for the comfort and general welfare of the wounded when brought to the hospital by the ambulance

service. He should direct the unpacking of the wagons for the establishment of so much of the hospital as may be necessary, and the subsequent repacking when the march is to be resumed. He should superintend the admission, return to duty, or transfer to base hospitals, of his patients. As commanding officer of the Hospital Corps detachment he should keep the accounts of the enlisted men on duty at the hospital. He should make timely requisition for medicines, medical and hospital stores, supplies and property, for the care, expenditure, and use of which he is held responsible. He should supply regimental and other medical officers of the division with such articles as may be required and are available for the treatment of the sick. He should send a daily report of sick and wounded and of the Hospital Corps to the chief surgeon, and transmit to the Surgeon General similar reports for the month, with a statement of the hospital fund. After an engagement he should forward lists of wounded, and on sending patients to base hospitals he should furnish transfer lists to the senior surgeon accompanying them. Medical officers may be assigned to assist him in the management of the hospital. One of these should act as executive officer, aiding the surgeon in charge in the work of supervision, and having special charge of the records. Another should superintend the cooking and diet of the hospital, drawing rations from the Subsistence Department, issuing them for use and keeping the accounts of the hospital fund. He should also have special charge of the hospital stores and of such articles of property as are connected with the cooking and serving of food. Others should be assigned as attending surgeons to care for the sick on the march and in camp, and during an engagement to look after the management of the wards, and to make notes of operative procedures, deaths, and of the progress of cases, for subsequent report to the surgeon in charge and entry on the records of the hospital.

(*e*) The officer in command of the ambulance company is charged with the care of the pay, clothing, and subsistence of his men, and is held responsible for the care of ambulances and other wagons, tents, horses, mules, forage, etc. His subaltern officers assist him in the discharge of these duties. During and after an engagement he is responsible for the

safe and speedy transportation of the wounded on litters and in ambulance wagons from the field to the hospital by way of the first-aid and ambulance stations, which latter he should organize.

ACTING ASSISTANT SURGEONS.

See A. R. 994. Amended by G. O. 174, 1898. To allow quarters, but not commutation of quarters.
A. R. 999. Fuel for.
A. R. 1119, 1121. Baggage of. See paragraph 18 (c).
A. R. 1464. Chief surgeon to make return of.

18. A contract with a private physician for the performance of the duties of a medical officer agreeably to Army Regulations is made in quadruplicate; two copies to be forwarded to the Surgeon General for his action and record, one copy to be given to the physician to be contracted with, and one copy to be retained by the officer making the contract. Accounts arising under this contract are paid by the Pay Department. Contracts made by the Surgeon General, or the chief surgeon of a military department or army in the field, will be annulled only by the direction of those officers.

(*a*) Whenever the contract of an acting assistant surgeon is annulled, the fact and date of annulment will be noted in writing on his contract, and when an acting assistant surgeon is ordered to his home for annulment of contract, such fact will also be noted thereon by the officer under whose orders he may at the time be serving.

(*b*) Acting assistant surgeons must present their contracts to paymasters when applying for payment of salaries, and paymasters will indorse thereon date and period for which paid.

(*c*) A. R. 1119 prescribes the allowance of baggage to be transported at public expense for acting assistant surgeons and hospital stewards. When changing station the maximum allowance for an acting assistant surgeon is 1,200 pounds, and for a hospital steward 500 pounds in addition to that which is transported free of charge under the regular fares by public carriers. When embarking under orders for extended service over the sea for duty, the allowance of baggage to be transported by the Quartermaster's Department

from initial point to port of embarkation and from port of destination to garrison station is three times the allowance prescribed above for change of station.

(*d*) Acting assistant surgeons are entitled to the same respect and obedience from enlisted men as commissioned officers.

(*e*) An acting assistant surgeon may wear the uniform of an assistant surgeon, with the rank of first lieutenant, the straps and ornaments to be in silver instead of gold.

(*f*) The detail of acting assistant surgeons on councils of administration for the purposes required in paragraph 159, A. R., disposal of the effects of a deceased soldier, is authorized.

(*g*) An acting assistant surgeon on duty at a post or station, where there is no commissioned officer present, is authorized under paragraphs 1354 and 1357, A. R., to receipt for the funds for, and witness the payment of the same to the enlisted men there stationed. (See also 20 (*a*), (*b*), and 131.)

THE HOSPITAL CORPS.

See A. R. 931. Dishonorable discharge of.
A. R. 1396. Hospital and ambulance service performed by.
A. R. 1397. Amended by G. O. 20, 1899. See paragraph 19.
A. R. 1398. Reenlistment of hospital stewards.
A. R. 1399, 1400. Enlistments and reenlistments.
A. R. 1401. Personal reports of hospital stewards.
A. R. 1402. Hospital stewards not to be reduced; revocation of detail of acting stewards.
A. R. 1403. Transfers from the line.
A. R. 1404. Married men not to be enlisted.
A. R. 1405. Inspection, muster and duties of.
A. R. 1406. Transfers by department commanders to meet emergencies.
A. R. 1407. Pay and clothing accounts kept by surgeon.
A. R. 1408. Monthly return of.
A. R. 1409, 1410, 1411. Allowance of, at posts.
A. R. 1420–23. On field service.

19. *A. R. 1397, as amended.*—"No person will be appointed a hospital steward until he has served a year as acting hospital steward; nor will a steward be appointed or an acting steward be detailed until he has passed a satisfactory examination, under the direction of the Surgeon General. Privates who have served at least three months in the Hospital Corps may be recommended to the Surgeon General for promotion by

the senior medical officer of the command. From those thus recommended acting stewards will be detailed, after passing the required examination. These examinations will be conducted by a board composed of three medical officers of the station at which the applicant may be serving, or of such a number of medical officers less than three as may be present, and if no medical officer is there on duty, the candidate will be sent for examination to the nearest station provided with such an officer. The report of the board will be forwarded direct to the Surgeon General."

(*a*) By direction of the Secretary of War, officers commanding the Division of Cuba, the Department of Porto Rico, the Division of the Philippines, and the troops in Hawaii are charged with the full control of the transfer from the line, enlistment, reenlistment, and discharge of members of the Hospital Corps of their commands, and with the detail of acting hospital stewards, provided that the allowance of acting hospital stewards and privates of the Hospital Corps, as fixed for each of these commands, be not exceeded, except by special authority; and provided also, that privates shall, whenever practicable, be required to pass a satisfactory examination, under regulations prescribed by the respective chief surgeons of the commands above specified, before they are detailed as acting hospital stewards. The provisions of Army Regulation 1397, so far as they conflict with this order, are suspended; but hospital stewards will be appointed as provided by existing regulations, after examination under direction of the Surgeon General.

20. The examination for the positions of acting hospital steward and hospital steward will be both oral and written. The board will investigate and report upon the following: (1) Physical condition; (2) character and habits, especially as to the use of stimulants and narcotics; (3) discipline and control of men; (4) knowledge of regulations; (5) nursing; (6) dispensary work; (7) clerical work; (8) principles of cooking and mess management; (9) Hospital Corps drill; (10) minor surgery and first aid, including extraction of teeth. The written examination will embrace the following subjects: (1) Arithmetic; (2) materia medica; (3) pharmacy; (4) care of sick and ward management; (5) minor surgery and first aid;

(6) elementary hygiene. Proficiency in penmanship and orthography will be estimated from the papers submitted.

The questions for use in the written examination for hospital steward will be sent from the office of the Surgeon General. Those in the examination for acting hospital steward will be prepared by the examining board, or sent from the Surgeon General's Office, as the Surgeon General may direct.

The replies certified to by the board as *having been made without recourse to books, memoranda, or other sources of assistance* will be forwarded with the report of the board direct to the Surgeon General, in whose office the papers in the hospital steward examinations will be marked. In the examination for acting hospital steward the board will mark the papers before forwarding them and report as to the eligibility of the candidate. The examination for both grades will embrace the same subjects, but that for acting hospital steward will be less difficult.

(*a*) The examinations may be conducted by acting assistant surgeons.

(*b*) Medical officers will not make enlistments or reenlistments for the Hospital Corps without obtaining special authority from the Surgeon General. Acting assistant surgeons can not make enlistments, as the oath should be administered by a commissioned officer.

(*c*) Slight physical defects in applicants, which, under existing orders, would disqualify for the line, but would not interfere with the *full* performance of the duties of a member of the Hospital Corps *in garrison* or *in the field*, may be waived, provided authority therefor has been obtained from the Surgeon General. An excessive refractive error (A. R. 1399) is defined to be one exceeding 10/20. If the vision of one eye is not less than 10/20 the applicant may be accepted, even though the vision of the other eye is less than 10/20, provided that the defective vision in either eye is not due to disease and in the better eye can be completely corrected by glasses.

(*d*) Note should be made on the enlistment paper of any special knowledge professed by applicants, as of cooking, gardening, or of a trade or other useful occupation. Those applicants who have graduated in pharmacy, or who have been licensed by State boards of pharmacy, should submit

proof thereof, by diploma or otherwise. Trained nurses, or those who have served as such in civil hospitals, should present certificates of their training or service.

(*e*) The duties of hospital stewards and acting hospital stewards are to look after and distribute hospital stores and supplies; to care for hospital property; to compound and administer medicines; to supervise the preparation and serving of food; to maintain discipline in hospitals and watch over their general police; to prepare reports and returns; to supervise the duties of the members of the Hospital Corps in hospital and in the field, and to perform such other duties as may, by proper authority, be required of them.

(*f*) A reexamination before first reenlistment as hospital steward may not be required if the surgeon of the post and chief surgeon state that the steward has performed his duties efficiently, but will be held before second reenlistment. No subsequent reexaminations will ordinarily be required.

21. In stating "character of the soldier, in detail," on the descriptive list of a member of the hospital corps transferred from one station to another, in addition to his general character as usually given, his habits as to sobriety and his attention to duty will be noted, adding, in case of a hospital steward or acting hospital steward his ability to command men, and in case of a private his special qualifications as nurse, cook, etc. In noting physical condition on descriptive list, any important defects will be mentioned. In each case of transfer from a company of instruction a special report of results of instruction will be made, on information slip, to the surgeon of the new station, to be forwarded by him through the chief surgeon to the Surgeon General. The following order will be used, estimating each item on the basis of a maximum of 10: (1) Discipline; (2) nursing; (3) first aid; (4) drill; (5) cooking; (6) pharmacy; (7) clerical work; (8) field work; (9) care and management of animals.

22. At posts entitled to an acting hospital steward, where none is on duty, the allotment of privates may be temporarily increased by one private under instruction for the vacant position.

23. Commanding officers will issue to members of the Hospital Corps revolvers or other available firearms when detailed

for service in the field during Indian wars, or when left with the sick or wounded under circumstances which justify the expectation that their rights as noncombatants, under the Geneva Convention, will not be recognized.

(*a*) When it is necessary to employ members of the Hospital Corps on guard duty at posts at which no other troops are stationed, the issue of firearms to them is authorized. With these exceptions, no arms will be issued to members of the Hospital Corps.

24. All members of the Hospital Corps casually at a post are placed under the immediate orders of the surgeon commanding the detachment Hospital Corps.

25. When a member of the Hospital Corps whose descriptive list has not been received is transferred elsewhere, or when request is made for the descriptive list of a former member of the Hospital Corps detachment and no descriptive list has ever been received in the case, the medical officer will forward a transcript of the soldier's record in the clothing and descriptive book, stating the amount of clothing drawn, amount due for ordnance, stoppages by sentence of court-martial, and any other facts, including payments made to soldier, which should be known in order that the man's status may be thoroughly understood. If no clothing has been drawn, no ordnance charged, or no stoppages made by sentence of court-martial, the fact should be distinctly stated. If a transcript has been received instead of a descriptive list from the former commanding officer of the man, the facts contained in this should be embodied in the new transcript. In such cases the charges against the soldier should be entered separately for each period covered by transcripts. For purposes of identification and to facilitate further inquiry, the man's own statement as to enlistment and as to his service and the pay and clothing drawn for the time not covered by transcripts, will be briefly recorded. Transcripts will be prepared in duplicate; one copy will be forwarded to the officer requesting descriptive list and one copy to the Surgeon General. In case inquiry for the descriptive list is made by the Surgeon General, one copy will be sufficient.

26. Acting hospital stewards and privates of the Hospital Corps, when serving at posts or stations where there are

troops of but one arm of the service, will have the same allowance of clothing as a corporal of the arm of the service with which they are on duty. When serving at posts where there are troops of more than one arm of the service, they will have an allowance of clothing equal to the highest allowance received by any corporal serving at the same post or station. When serving at posts or stations at which no troops of any other arm of the service are on duty, they will have an allowance of clothing equal to the allowance of a corporal of the arm of the service receiving the highest allowance.

(*a*) Full-dress uniform is not issued to members of the Hospital Corps.

(*b*) Bleached cotton duck clothing is provided for those on ward duty.

(*c*) To each enlisted man of the Corps who is entitled to wear service chevrons two pairs of such chevrons will be issued per annum free of charge.

AMBULANCE SERVICE.

See A. R. 214. Ambulance flags.
A. R. 1414. Allowance of ambulances at posts.
A. R. 1415. Authorized uses of ambulances.
A. R. 1416. Appointment and duties of ambulance drivers.
A. R. 1417. Litters for company use.
A. R. 1419. Inspection of ambulances, litters, etc.

HOSPITAL CORPS IN THE FIELD.

See A. R. 1420. Strength of Corps.
A. R. 1421. Mounts for.
A. R. 1422. Authorized uses of ambulances.
A. R. 1423. Sick or wounded men accompanied from the field by.

27. The following allowance of horses for mounts, wheel transportation, tentage, etc., for the Medical Department of the Army in the field is authorized:

Horses for mounts.

	H. S.	A. H. S.	Privates.
To each regiment of infantry	1		1
To each artillery battalion (3 light batteries)		3	1
To each cavalry regiment	1		2
To each corps headquarters	1		2
To each division headquarters	1		1
To each brigade headquarters	1		1
To each division ambulance company	7	3	12
To each corps reserve ambulance company	7	3	12
To each division field hospital	2	2	6
To each corps reserve hospital	2	2	6

Wheel transportation.

One ambulance to 400 men of the effective force.
One 4-horse wagon to 600 men of the effective force.
One 4-horse wagon to each brigade.

Tentage.

For each ambulance company:
17 common tents for privates.
2 common tents for noncommissioned officers.

For each division field hospital:
15 common tents for privates.
2 common tents for noncommissioned officers.
1 common tent for supplies.
Hospital tents on a basis of 6 patients (beds) to each tent.

Hand litters, with slings, to be furnished by the Quartermaster's Department:
1 for each company.
2 for each ambulance.

Requisitions for the necessary articles of camp and garrison equipage, tools, etc., will be based on the official allowances for companies of infantry.

Requisitions for the before-mentioned supplies will be sent in separately for *divisions*, with statement whether or not the division organization is complete.

Horses and wheel transportation will be furnished by the Quartermaster's Department, and horse equipments by the Ordnance Department.

(*a*) Commanding generals of army corps are directed to detail, upon the application of chief surgeons of corps, two line officers not above the grade of first lieutenant for duty as acting assistant quartermasters with the medical service of each division.

28. The ambulance and hospital service of each independent command will be under the supervision of its chief surgeon. This officer should make all necessary arrangements for the care and transportation of the wounded, who, during an engagement, will receive attention at the following principal points, and in the following order: (1) With the line of battle

under fire; (2) at the first dressing stations; (3) at the ambulance station; (4) at the division, brigade, or field hospitals. He establishes the ambulance stations in the rear, and gives directions concerning the first dressing stations; details the proper number of privates of the Hospital Corps, acting hospital stewards, hospital stewards, and medical officers for duty with the advance line, and for the care and transportation of the wounded between that line, the first dressing stations, the ambulance stations, and the hospitals. (See also paragraph 17 (*e*).)

29. First dressing stations will be established at the place nearest to the combatants, where the wounded and those caring for them will not be unnecessarily exposed to fire. Ambulance stations will be established at some place of security in the rear, or in some convenient building near the field of battle. The hospitals will be established by the chief surgeon, after consultation with the commanding general. Dressing stations will be distinguished during the day by red-cross flags, and at night by red lanterns.

THE REGIMENTAL HOSPITAL IN FIELD SERVICE.

30. The purpose of the regimental hospital in field service is to furnish protection and care to the sick of the command while on a march or in the field, or to those temporarily sick while in camp of instruction. It is an emergency hospital in the one case and a detention hospital in the other, but is not intended for the treatment of the very ill, who in the event of a move would prove to be an incumbrance to the regiment. When cases are found to be serious in nature they should be promptly transferred to brigade or division hospitals, except where regiments are isolated, in which event the bed capacity may be increased as necessary, all of the sick being cared for and transfers made to general hospitals when ordered by proper authority.

(*a*) The tentage will consist of—

Four hospital tents (two to be used as wards, one as dispensary and storage, and one for the mess).

Two common tents for noncommissioned officers.

Three common tents for privates.

One common tent for cook tent.

(*b*) The Hospital Corps detachment allowed a regiment serving in divisions and departments of the insular possessions of the United States is fixed at one hospital steward, three acting hospital stewards, and twelve privates of the Hospital Corps.

31. The field equipment to be carried by privates of the Hospital Corps is as follows: Canteen, canteen strap, haversack, haversack strap, litter sling, waist belt, waist-belt plate, meat can, tin cup, knife, fork, spoon, hospital corps pouch; when serving as orderly, a medical officer's orderly pouch, instead of the hospital corps pouch. The field equipment for noncommissioned officers is the same as for privates, with the exception of the litter sling and hospital corps pouch.

32. The articles heretofore carried in the knapsack or blanket bag, together with the overcoat, will be rolled in the piece of shelter tent supplied each soldier, and carried in the transportation wagon; when the soldier is mounted, and no wheel transportation is available, they will be carried on the saddle, as directed in the Drill Regulations for the Cavalry.

INSTRUCTION IN FIRST AID.

33. A. R. 1412, amended by G. O. 39, 1900, to read as follows: "Special instruction in the duties of litter bearers and the methods of rendering first aid to the sick and wounded will be given to all enlisted men of the Army by their company officers for at least four hours in each month, except that such instruction for officers and enlisted men of the seacoast artillery will be limited to one hour per month. Company commanders will be supplied from the Surgeon General's Office with the Drill Regulations for the Hospital Corps, and the surgeon of the post, under the direction of the post commander, will thoroughly instruct all company officers serving with troops in the professional knowledge required."

34. A. R. 1413, amended by G. O. 60, 1897, to read as follows: "All available men of the Hospital Corps will be instructed under the supervision of the surgeon of the post for at least eight hours in each month in the duties of litter bearers and the methods of rendering first aid to the sick and wounded."

35. The instruction necessary to enable company officers to drill the enlisted men of their companies "in the duties of

litter bearers and methods of rendering first aid to the sick and wounded" will be given chiefly by practical demonstrations, made in their presence. The prescribed drills of the detachment of the Hospital Corps will be utilized for this purpose, especial attention being given to the instruction in first aid. The practical demonstrations, accompanied by full explanations, should include methods of arresting hemorrhage, of applying the dressings contained in the first-aid packet, of immobilizing a fractured limb, of resuscitating those apparently drowned, etc., and should be supplemented by lectures designed to convey all essential information with reference to the anatomy of bones and blood vessels; the causes and treatment of syncope and of heat exhaustion; the differential diagnosis and treatment of sunstroke; the rationale of the various measures of first aid to the sick and wounded, etc.

MONTHLY RETURN OF HOSPITAL CORPS.

36. All members of the Hospital Corps at a post or station, including those newly enlisted, will be entered on the monthly return (A. R. 1408). They are to be taken up from date of receipt of notice of assignment by competent authority, whether they have joined or not. Following these will be given the names of those who have ceased to belong to the command since last return, for example, by transfer under orders from the Headquarters of the Army or a department commander, discharge, death, desertion, etc. Temporary absences, as on detached service, furlough, in hands of civil authorities, etc., are not to be reported as "losses." Lastly, Hospital Corps men belonging to other posts or stations, temporarily attached to the command for quarters and rations or for treatment or in confinement, should be noted by name only, and their status fully explained in Column IV.

(*a*) The return should show by name the total present and absent at midnight of the last day of the month, casualties occurring on that day being entered among the losses. It should be prepared only after the expiration of the month, and mailed within the five days next following—one copy direct to the Surgeon General and one to the chief surgeon. Upon the breaking up of any hospital or command, a final return should be made, showing the distribution of the

members of the Corps so far as known. (*Moreover, it is to be noted that, irrespective of these returns, all changes in the status of members of the Corps, and hospital matrons, should be reported to the Surgeon General through the office of the chief surgeon on the day of the change.*)

(*b*) In Column IV it should be noted whether hospital stewards are married or single, giving the number of children residing with them at the post.

(*c*) The hospital status of a private should be stated, as wardmaster, nurse, cook, or attendant, or orderly if in the field; and the special duties performed by each returned as attendant should be given in Column IV.

(*d*) In all cases the date of joining the detachment at the post, station, or in the field, should be that of the personal report of the commanding officer.

In case of sickness the date of admission to sick report and of return to duty should be given, but the cause need be stated only when the sickness is due to vicious or immoral habits, or not contracted in the line of duty.

In cases of furlough state the authority, duration, date of departure and return, station at which to report.

Arrests, confinements, trials, and sentences by courts-martial and in cases of desertion, the facts as to apprehension, surrender, sentence, discharge, etc., must be carefully noted.

When an individual is retained in the service beyond the period for which he was enlisted, the cause of his retention should be stated.

In all cases note carefully dates and places, numbers, dates, and sources of orders or description of authority.

(*e*) Names of matrons will be arranged alphabetically, and the date of appointment entered in Column IV. *In cases of immediate succession, the new appointment should take effect from the day following the occurrence of the vacancy.*

(*f*) In case of discharge the following data will be noted in Column IV, viz: 1st, character; 2d, objections to reenlistment; if none, it will be so stated; 3d, physical condition, good or bad; 4th, single or married; 5th, remarks, if any.

ARMY NURSE CORPS.

37. The Nurse Corps shall consist of chief nurses, nurses, and reserve nurses.

The Surgeon General may assign female nurses to duty at all Army hospitals where the cases treated are of such character as to require the care of trained nurses. Under ordinary conditions not more than two will be assigned to a hospital having less than twenty beds.

A medical officer requiring the services of female nurses at a hospital will make application to the Surgeon General through the chief surgeon. (See 37 (*g*).)

At each hospital to which nurses are assigned one of them shall be a chief nurse, appointed by the Surgeon General.

Women not under Army contract will not be permitted to serve as nurses in Army hospitals unless in an unforeseen emergency, and in such case the medical officer in charge of the hospital will immediately report the fact to the Surgeon General for his action.

(*a*) *Appointment.*—To be appointed in the Army a nurse must be qualified therefor, physically, mentally, and morally, as hereinafter provided:

1. She must present a physician's certificate of health on a blank form which will be furnished by the Surgeon General.

2. She must be a graduate from a training school for nurses which gives a thorough professional education, both theoretical and practical, and requires at least two years' residence in a hospital.

3. She must be indorsed by the present superintendent of nurses at the hospital from which she graduated and also by the one under whom she was trained. Blanks for these indorsements will be furnished by the Surgeon General and are to be returned directly to him.

4. She must be a citizen of the United States.

These provisions may be waived in part in the cases of dietists, of immunes to yellow fever, and of nurses who have rendered satisfactory Army service during the Spanish-American war.

(*b*) *Term of service and annulment of contract.*—When a nurse on the eligible list is appointed for active service, she

signs a contract to serve for at least one year, unless sooner discharged.

When appointed, a nurse is considered as on probation regarding her fitness for Army duty, and if not found acceptable will be recommended for annulment of contract by the chief nurse. Such recommendation, approved or disapproved by the medical officer in charge of the hospital, will be forwarded to the Surgeon General.

The contract of a nurse will not be annulled at her own request except for good reason, presented in writing and forwarded to the Surgeon General through the chief surgeon.

When a medical officer has more nurses than are needed at his hospital he will report the fact to the Surgeon General, if the hospital is in the United States; otherwise he will report it to the chief surgeon of the department. If the Surgeon General or chief surgeon does not transfer the surplus nurses to another hospital, they will not be granted a leave of absence, but will be ordered to their homes to report to the Surgeon General for annulment of contract. The medical officer requesting or issuing such orders will immediately forward a copy to the Surgeon General, stating in full the reason for his action, and he will also forward the special efficiency report prepared by the chief nurse.

He will indorse on the nurse's contract the date of her departure from the hospital and the date to which she was last paid, and direct her, on arrival home, to forward it to the Surgeon General and report for annulment of contract or orders. All contracts will be annulled by the Surgeon General (or by his order), who will fix the date thereof. A nurse will not be entitled to rations, or to pay in lieu thereof, while awaiting annulment of contract.

If a nurse prefers to have her contract annulled without returning home, no orders will be issued in her case and no transportation will be furnished.

(*c*) *Pay.*—For service in the United States a nurse will be paid forty dollars a month, and in Cuba, Porto Rico, the Hawaiian Islands, or Philippine Islands, fifty dollars a month.

All chief nurses receive the same allowances as nurses, and where less than five nurses are constantly serving at a hospital, the chief nurse does not receive increased pay.

Where five or more, and less than ten, are constantly serving, the chief nurse receives ten dollars a month more than the nurses. Where ten or more are constantly serving, she receives twenty-five dollars a month more than the nurses.

A nurse will receive seventy-five cents per day in addition to her pay, when serving at a place where rations can not be issued to her, but not while traveling under orders. When on leave of absence she will be paid twenty-five cents per day in lieu of rations. These amounts will be added to the voucher for her pay, with a brief statement of the circumstances and an official copy of her leave of absence, and will be paid by the Medical Department of the Army.

Accounts for the pay of nurses under contract will be prepared by the officer under whose direction they may be serving, upon vouchers (Form 4) in duplicate, properly certified by the officer in charge and signed by the nurse and forwarded to a disbursing officer for settlement. No payments to nurses will be made on pay rolls.

Vouchers will be prepared and forwarded at the end of each month, upon the annulment of contract, upon transfer to another station and upon departure on leave of absence or by order; the date of last payment and by whom paid will be stated on each voucher, and upon final voucher the date of annulment of contract.

In preparing vouchers the officer will certify only as to time of service and amount due the nurse while said nurse has been on duty at the hospital under his charge; except, that upon the presentation of an order for transfer to said hospital, or a leave of absence from which a nurse has returned (if said leave of absence is with pay), the officer will take up on the voucher and credit the nurse with the amount due for the period covered by said order or leave of absence.

The nurse's copy of her contract will in all cases accompany vouchers when presented for payment, and will be returned to her with the check when received from the disbursing officer.

Disbursing officers will note all payments on the contracts of nurses, and will forward to this office, on information slip, the name and amount paid to each, and for what period paid.

Disbursing officers must be careful not to make payments in advance.

New contracts (in quadruplicate) will be made with each nurse when for any reason the rate of pay is changed, two copies to be forwarded to this office, with the oath, one copy to be given to the nurse, and one to be retained by the officer making the contract. The Christian names and surname of the nurse must be given in the contract, and her signature must correspond therewith. The new contracts will be exact copies of the old contracts, with the exception of the change in the "rate of pay."

(*d*) *Transportation.*—A nurse can not leave her station except when ordered to do so, or when granted a leave of absence.

Before starting on a journey at public expense she must receive a written order from the proper authority, together with an order for her railway ticket and sleeper (or accommodations on a transport or other vessel). She must also have the date of her departure and the time to which she was last paid indorsed on her contract.

When traveling under orders no delay in starting and no stop-over privileges are allowed.

Wherever such allowance is not granted upon travel ticket, transportation for 150 pounds of baggage will be allowed a nurse when traveling under orders.

A nurse returning from service outside of the United States will usually be furnished transportation to New York or San Francisco. On arrival in either city she will proceed to the Army Building, where, on presentation of her travel order, she will be furnished transportation to her destination.

Transportation will not be furnished, nor will traveling expenses be allowed, for any journey which a nurse may take while on leave of absence, except that if she goes to and from the United States she may, if practicable, be authorized to travel on a Government transport.

Nurses, whether still in the service or not, will be reimbursed either by the Quartermaster's Department or by the Auditor for the War Department for incidental expenses incurred in any journeys under orders. An itemized account, not to exceed two dollars for each day of travel, must be prepared

in duplicate and certified to before a notary. Blank No. 13, Quartermaster General's Office, may be used for this. When possible, receipts for expenditures are to be appended, and the whole is to be forwarded to the Quartermaster General, War Department, Washington, D. C., or to the nearest quartermaster, for settlement. In all cases the nurse must furnish her copy of the order in obedience to which she traveled, and if she was not given such copy (or has mislaid it), she must obtain it by application to the officer who directed her return home. This application may be inclosed in an envelope addressed to the Surgeon General of the Army, who will forward it to the officer for compliance with her request.

(*e*) *Leave of absence.*—The total duration of leave of absence with pay granted a nurse shall not exceed thirty days in each calendar year, regardless of length of service.

The Surgeon General or chief surgeon of a military department or of an army corps, or the commanding officer of a general hospital, or surgeon in charge of a hospital, may grant leaves of absence to a nurse when it can be done without detriment to the service. No leave of absence will be granted unless requested by the nurse in writing. The nurse must furnish her copy of contract on which the length of leave of absence, if granted, and whether with or without pay, will in all cases be indorsed. The officer will give to the nurse the paper granting the leave of absence but will not furnish her orders on which she may secure transportation. The facts will be reported to the Surgeon General on information slip.

When a leave of absence is granted to a nurse on insular service, the time which may be spent in traveling to and from the United States will not be counted. She must report her arrival in New York, N. Y., or San Francisco, Cal., to the medical officer at the Army Building, in order that he may note the date of arrival on her leave of absence.

A nurse on leave of absence in the United States will report the fact, in writing, to the Surgeon General at least one week prior to the expiration of said leave.

At the close of her leave of absence a nurse must report in person at her station, if in the United States, otherwise to the

medical officer at the Army Building at the port from which she is to embark for her station.

Special leaves of absence without pay may be granted under exceptional conditions, but shall not exceed thirty days at any one time, unless by authority of the Surgeon General. At places where the services of trained nurses are not otherwise obtainable a nurse may, if she so desires, and with the approval of the medical officer in charge of the hospital, be granted leave of absence without pay in order to take a private case.

An extension of leave of absence may be granted by the same officer and under the same conditions as the original leave of absence or it may be extended by the Surgeon General.

(*f*) *Illness.*—A nurse is entitled to receive medical attendance and medicines when ill. So far as possible this will be provided for at each hospital where they may be serving, but when it is reported as desirable the Surgeon General (or chief surgeon within his department) may give orders for a nurse's transfer to and treatment in some other Army hospital. Bills contracted by a nurse for medical attendance can not be allowed, nor will extra leave of absence with pay be granted because of illness.

The contract of a nurse who becomes ill while in the service will not be annulled during such illness, unless at her own request, but if she so desires she may be ordered to her home to await annulment of contract.

(*g*) *Transfers.*—When the necessities of the service require it, nurses will be transferred from one hospital to another. A nurse ordered to duty outside of the United States will usually be expected to remain at least a year. Orders for transfers will be issued by the Surgeon General, except that where a chief surgeon has jurisdiction over more than one hospital he may order transfers between them, reporting the fact immediately to the Surgeon General.

(*h*) *Quarters.*—Nurses will be furnished rooms or tents for sleeping, according to the accommodations available at each hospital, and where there are several nurses, one room or tent will be provided as a common sitting room.

Sheets, towels, pillowcases, table linen, and other washable articles furnished by the hospital for the nurses' use will be washed as part of the hospital laundry.

(*i*) *Rations.*—A nurse is entitled to one ration in kind or to pay in lieu thereof, as stipulated in the contract.

Nurses will be served in a separate dining room, if possible, and if their number warrants it; otherwise at different hours from men using the same room. They are entitled to the use of table linen which is supplied to hospitals.

(*j*) *Reports and returns.*—If the nurses assigned to any hospital are too few or too many the medical officer in charge thereof will report that fact to the Surgeon General.

Every change in the status of nurses, such as arrival, departure, leaves of absence granted, orders given, death, etc., will, on the day of its occurrence, be reported to the Surgeon General by the medical officer in charge of a hospital. Information slips will be used for this purpose, giving Christian names and surname in each instance.

On the last day of each month the medical officer in charge will forward a return of female nurses under contract to the Surgeon General, through the chief surgeon, on blank form furnished by this office.

He will forward directly to the Surgeon General the efficiency reports prepared by the chief nurse, and will indorse thereon his remarks, stating whether or not he concurs in the grading reported by her. He will also indorse on it his report of the efficiency of the chief nurse, specifying in detail the character of the services rendered by her.

(*k*) *Uniform.*—The uniform of the Army Nurse Corps (female) consists of a white linen shirt waist and apron, with skirt, necktie, and, if needed, a short jacket of army blue galetea. A nurse provides for the laundry of her uniforms. A chief nurse shall wear a red silk sash knotted around the waist, with or without the apron.

The badge of the corps is the cross of the Medical Department in red enamel with gilt edge. This is pinned on the left side of the collar of the uniform or on a corresponding part of her dress when she is not in uniform.

When a nurse is appointed she will be supplied with detailed instructions on this subject, and will immediately

procure her uniform. It will invariably be worn during her hours of duty.

Exceptions to the rules regarding uniform may be made by the Surgeon General when deemed desirable.

(*l*) *Duties of a nurse.*—A nurse will study and conform to the rules of military discipline and obey strictly and without delay any order which may be given her by her superior officers or her chief nurse. A nurse will familiarize herself with the details of this circular, of which she will retain a copy, and will study such portions of the Army Regulations and Manual for the Medical Department (which are in the custody of the chief nurse) as relate to the performance of her duties.

When required by the climate, the chief nurse may, with the approval of the medical officer in charge, substitute the eight-hour day for the usual ten or twelve hours of ward duty.

If a hospital is large enough to require it, one or more nurses may be assigned to duty as assistants to the chief nurse, and if several nurses are on night duty, one will act as chief night nurse.

Contract nurses may be detailed to attend sick officers not in hospital when, in the opinion of the surgeon, their services can be spared from the hospital to which they are attached and are necessary for the proper care of the officer. But, when practicable, officers requiring such special care should be treated in a post or general hospital. Nurses traveling under orders, on transports, will assist in the care of officers or enlisted men requiring their services when requested to do so by the attending surgeon.

The families of officers are not entitled to the services of contract nurses.

A nurse will not receive presents from patients or from the relatives or friends of patients.

A nurse must carefully preserve her copy of contract and present it to the proper officer for indorsement whenever she is paid, or given orders, or granted leave of absence, or her contract is annulled.

(*m*) *Dietist.*—When assigned to duty as a dietist, a nurse will have the supervision, under the direction of the medical officer, of the preparation of food intended for patients unable to eat the usual ration. She may also be required to herself

prepare such food, or to instruct enlisted men in its preparation, or to attend to the drawing of rations or preparation of food for the nurses, or to perform such duties as may be assigned to her by the chief nurse, with the approval of the medical officer in charge; the whole to be regulated by the size and requirements of each hospital.

(*n*) *Chief nurse.*—The Surgeon General will appoint as many chief nurses as may be necessary, by promotion from the grade of nurse; such appointees to be reduced if unsatisfactory or if a less number of chief nurses are required.

If at any hospital one (or more) of the nurses proves herself possessed of marked executive ability, good judgment, and tact, she should be recommended for promotion by the chief nurse and medical officer in charge.

When a vacancy occurs, an eligible nurse will be appointed chief nurse by the Surgeon General.

The position of chief nurse is, so far as Army conditions permit, equivalent to that of a superintendent of nurses in a civil hospital. It is her duty to supervise the ward work of the nurses and see that it is kept up to the highest standard; to regulate the nurses' hours and assign each to her specific duty. She will attend to their comfort and welfare, and see that they receive proper attention when ill, and will be responsible for their dignified and discreet conduct. She will see that the provisions of this circular and the regulations made by the commanding officer of the hospital with reference to the nursing service are faithfully carried out, reporting to him any misconduct or neglect of duty on the part of female nurses.

The chief nurse will render efficiency reports of the nurses serving under her on the last day of March, June, September, and December of each year. A similar report will be made when she is about to leave a hospital, and whenever she may consider it desirable, or it may be ordered by the Surgeon General. Special efficiency reports of an individual nurse will be made whenever she is ordered away from the hospital, or whenever the chief nurse deems it desirable. Blanks for efficiency reports will be furnished by the Surgeon General.

In smaller hospitals, according to the circumstances in

each, the surgeon may assign her additional duty, either in the wards or in charge of the linen room, or as dietist.

She will familiarize herself with the "Army Regulations," and the "Manual for the Medical Department," so far as they affect her duties, and will keep copies of these books for consultation by the nurses.

All reports will be addressed to the Surgeon General and forwarded through the medical officer in charge. Any communication requesting or involving the issuing of orders is official and will follow the same channel.

(o) *Reserve nurses.*—A certain number of nurses, who have rendered at least four months' satisfactory service in the Army, will be appointed reserve nurses.

Each reserve nurse will sign an agreement to enter active service whenever required, and to report by letter to the Surgeon General on the 1st of January and the 1st of July of each year, and at other times if required. Reserve nurses wear the badge of the Army nurses, but are not paid except when on duty.

When assigned to active duty, they will be subject to all established rules and regulations, and will receive the pay and allowances of nurses on the active list. On returning to her home from active duty, the Surgeon General will allow her eight (8) days' leave of absence with pay, in addition to that to which she may otherwise be entitled.

A nurse will be dropped from the reserve list upon reaching the age of forty-five years, or if she ceases for five years to practice her profession, or if she becomes incapacitated from ill health, or for any other good and sufficient reason. But a nurse shall not be dropped from the reserve list without information being furnished her of the cause for such action and an opportunity being given her to reply to any charges which may have been made against her.

MALE NURSES.

38. The regulations governing the Army Nurse Corps (female) are also applicable in general terms to male nurses under contract.

SPECIAL NURSES.

39. *A. R. 1457 (a), added to the Army Regulations by G. O. 45, 1900.*—Accounts for the payment of special nurses employed, when necessary for the proper care of the patient, to attend sick officers or soldiers on duty at posts or stations where treatment in an Army hospital can not be obtained will be sent to the Surgeon General for settlement. The accounts will set forth the full name and address of the nurse, the full name, rank, company, and regiment or corps of the patient, the disease for which he was treated, the dates of service and number of hours per day service was rendered, and the rate of pay per week or per month. The rate shall in no case exceed $10 per week. The nurse will certify that the account is correct and just; that the services were rendered as stated, and that the patient is not related to the nurse. The attending physician will certify that the services of a nurse were indispensable to the proper care of the patient; that the nurse was competent; that the services were rendered as claimed, and that the charges do not exceed those customary in the vicinity for competent nurses. The officer will certify, or if no officer is cognizant of the facts, the enlisted man will make oath to the correctness of the account, stating that the patient was on duty at the time and place specified, and why treatment in an Army hospital could not be obtained. When practicable, the patient will pay the account and transmit it properly receipted to the Surgeon General for reimbursement, the fact of payment by the patient being plainly stated both by the patient and the nurse. No accounts for nurses employed in inconsiderable cases will be paid.

HOSPITAL BUILDINGS.

See A. R. 1424, 1425. Approval of plans and specifications for.
A. R. 1426. Alterations of or additions to.
A. R. 1427. Medical officer to inspect and report on.
A. R. 1428. Estimate of repairs, etc.
A. R. 1430. Restriction of their use to patients and enlisted men there on duty.

40. New floors in hospitals will not be painted. They may be finished in oil and paraffin, or oil, wax, turpentine, etc., to which coloring matter may be added if deemed necessary. Floors of verandas and porches should be protected by paint.

41. When an allotment of funds for the repair of a hospital or hospital steward's quarters has been made, the officer in charge will be notified of the action by letter from the Surgeon General, the receipt of which will be acknowledged by return mail. Estimates and other papers referring to a hospital must be prepared separately from those for a hospital steward's quarters. On the last day of each month, until the work is completed and so reported, the surgeon in charge will advise the Surgeon General, by information slip, of the progress effected, or, if none, the cause of the delay so far as he can ascertain it.

42. In every post hospital a room should, if possible, be set aside as an operating room. Special attention should be given at all times to the cleanliness of this room, including its walls and floors, as well as the necessary furniture. A stout table, of suitable size and plain finish, that can be easily scrubbed, should always be in readiness. In this room should be placed all the instruments and dressings, antiseptics, anæsthetics, and other appliances that may be needed in an emergency. While always accessible, they should be guarded from handling by irresponsible persons. The Arnold's sterilizer and the boiler of the kitchen stove or range afford ready means for sterilizing instruments, dressings, basins, towels, etc., that may be needed at an operation. At large permanent posts, if no suitable room is available, plans and estimates should be forwarded for such changes in or additions to the hospital building as will provide a conveniently located operating room. Provision should also be made for a laboratory, in which the chemical and bacteriological sets furnished can be conveniently arranged and kept always ready for use.

ARMY AND NAVY GENERAL HOSPITAL.

See A. R. 155. Transfer of soldiers for treatment in.

43. The Army and Navy General Hospital, Hot Springs, Ark., is under the direction of the Secretary of War, and is devoted to the treatment of the officers and enlisted men of the military and naval service of the United States, the officers of the Revenue-Cutter Service and of the Marine-Hospital service, *and honorably discharged soldiers and sailors of the Regular and Volunteer Army and Navy of the United States,*

for such diseases as the waters of the Hot Springs of Arkansas have an established reputation in benefiting, *except that cases of venereal disease will not be admitted.*

(*a*) Admission to this hospital is restricted to those of the above-named classes who require medical treatment, in the following order of preference: (1) Officers and enlisted men of the Army, the Navy, and the Marine Corps on the active lists, and cadets at the Military and Naval Academies; (2) officers and enlisted men of the Army, the Navy, and the Marine Corps on the retired lists; (3) officers of the Revenue-Cutter Service and of the Marine-Hospital Service; (4) *honorably discharged soldiers and sailors of the Regular and Volunteer Army and Navy of the United States may also be admitted by authority of the Surgeon General when there are vacant beds in the hospital.*

44. The organization of the hospital shall consist of one medical officer of the Army, who will command it, and such other medical officers of the Army and Navy as may be necessary, to be detailed by the Secretary of War or the Secretary of the Navy, respectively; one officer of the Quartermaster's Department or of the line of the Army as an acting assistant quartermaster, who will also be an acting commissary of subsistence, if required, detailed by the Secretary of War; such noncommissioned officers and men of the Hospital Corps as may be authorized by the Secretary of War; and such civil employees as may be necessary for the proper service of the hospital.

(*a*) The civil employees not in the classified service will be appointed by the commanding officer, having in view their fitness for the service required. They will be governed by such rules as may be promulgated for the service of the hospital, and they may be discharged by the appointing officer for unfitness, or when their services become unnecessary.

45. Officers under treatment, when subsisted in the hospital, will be subject to a charge for subsistence not to exceed one dollar and fifty cents per day, to be paid on the last day of each month, or upon leaving the hospital.

(*a*) Military or naval cadets will in like manner pay a subsistence charge at the rate of one dollar per day. Such cadets

while patients may have the privilege of the officers' mess, at the discretion of the commanding officer.

(*b*) Should an officer or cadet from any cause (as in case of death) fail to pay an account for subsistence when due, the fact will be immediately reported by the commanding officer to the Surgeon General of the Army, who will certify the fact to the Paymaster General of the Army, to the Surgeon General of the Navy, or to the Secretary of the Treasury, as the case may be, and the proper officers of the War, Navy, or Treasury Departments will take such steps as will promptly secure to the hospital payment of the amounts due.

(*c*) Enlisted men on the active list while under treatment or on duty in the hospital shall have the usual allowance of rations commuted at the rate of not to exceed forty cents a day for enlisted men of the Army, and thirty cents a day for enlisted men of the Navy, to be paid to the senior medical officer by the proper officers of the War and Navy Departments upon the receipt of monthly statements of amounts duly certified by the Surgeon General of the Army.

(*d*) Enlisted men of the Army, the Navy, or the Marine Corps admitted to the hospital by proper authority while on furlough will pay for subsistence at the same rate that the rations of the other enlisted men are commuted.

(*e*) Enlisted men of the Army, the Navy, and the Marine Corps on the retired list, and honorably discharged soldiers and sailors of the Regular and Volunteer Army and Navy of the United States, shall pay for subsistence at the rate of 40 cents per day.

46. Subsistence stores for use in the officers' and enlisted men's messes may be purchased by the commanding officer of the hospital from such officers of the Subsistence Department as the Commissary General of Subsistence may designate.

47. The commanding officer will account monthly to the Surgeon General of the Army for all money received or expended on account of officers and enlisted men.

48. The Surgeon General of the Army will certify monthly to the Surgeon General of the Navy all balances due on account of subsistence furnished to enlisted men of the Navy or Marine Corps on the active list, and to the Commissary General of Subsistence of the Army all balances due on account of

subsistence furnished to enlisted men of the Army on the active list, said men in each case being such as have been ordered to the hospital for duty or treatment.

49. Authority for the admission of an officer of the Army on the active list will be granted on his personal application, through the regular military channels, to the Adjutant General of the Army, for a sick leave of absence, based upon a medical officer's certificate that sets forth the disability for which treatment at this hospital is recommended, and the opinion of the medical officer that such treatment will conduce to the more rapid recovery of the patient. Sick leave of absence to enter the hospital will then be granted.

(*a*) The limit of a permit to enter the hospital is fixed at fourteen days.

(*b*) An officer's continuance in the hospital will be determined by the commanding officer, who will from time to time report to the Adjutant General as to the officer's physical condition, and will express his opinion as to the length of time required for treatment. If this is approved, the sick leave, if the officer has such, will be extended accordingly. Ordinarily, officers on the active list will not remain longer than four months at the hospital, and a special report will be made in the case of an officer who shall be under treatment there six months.

(*c*) Retired officers of the Army may make direct application, accompanied by a medical certificate, to the Adjutant General for permission to enter the hospital. Retired officers may leave the hospital at their discretion, but they will not remain in hospital longer than three months without special permission, based on the recommendation of the commanding officer.

(*d*) The accommodations for enlisted men of the Army are allotted among the several military departments. The commanding officer of the hospital will notify department commanders from time to time of the number of vacant beds at their disposal.

(*e*) For the admission of an enlisted man, application will be made to the department commander by the man's immediate commanding officer, on the recommendation of the surgeon, which will accompany the application. Should the chief sur-

geon so advise, the department commander may order the soldier to report to the commanding officer of the hospital for admission for treatment.

50. When in his opinion it is proper, the commanding officer of the hospital will issue the necessary orders for the soldier to rejoin his company or station. Should he be a fit subject for discharge for disability, or should a change of climate be thought necessary, the commanding officer of the hospital will notify the Adjutant General and make such recommendations as he may deem proper, when suitable orders will be issued in the case.

51. In selecting cases for this hospital, medical officers will exercise discretion, and will only recommend such as are serious or obstinate and do not promise good results if treated at the post. It is not required to certify that treatment at Hot Springs is *necessary* to restore health, but to establish a reasonable probability that the facilities there will materially aid in the rapidity and permanence of the recovery. Besides the transfer slip, an outline of the history and treatment of the case must accompany each patient.

52. The transfer of venereal cases to the Army and Navy General Hospital, Hot Springs, Ark., is prohibited. In order that patients suffering from venereal diseases may not be permitted to enter this hospital, medical officers will exercise great care in their examination of each case before they forward requests for admission.

GENERAL HOSPITAL AT FORT BAYARD, N. MEX.

53. This is a sanitarium for the treatment of officers and enlisted men of the Army suffering from pulmonary tuberculosis. Transfers of enlisted men suffering from this disease may be made to this hospital on the recommendation of medical officers of the Army (to be forwarded through military channels). The Surgeon General is authorized to provide for the care and treatment of discharged soldiers entitled to the benefits of the United States Soldiers' Home, Washington, D. C., who may be sent to the sanitarium by the board of commissioners of the Home, the expense for the maintenance of such discharged soldiers to be paid from the Soldiers' Home funds.

HOSPITAL MATRONS.

See A. R. 784. Muster and pay of.
A. R. 1006. Fuel for.
A. R. 1252, 1259, 1269. Rations for.
A. R. 1436. Appointment of.
A. R. 1437. Allowance to hospitals.
A. R. 1450. Medicines and hospital stores to.

54. Washing for the Medical Department not done by a hospital matron is paid for on vouchers (Form No. 4) which are forwarded, through the chief surgeon, or, if from independent posts, direct to the Surgeon General. The vouchers should show (1) the period covered by the service, from first to last dates; (2) the kind of articles, either in detail or by general words, such as, *hospital bed and table linen;* (3) that the articles are the *property of the Medical Department;* (4) the name of the post or station where the articles are in use; (5) their number, and (6) the price per piece, dozen, or hundred, and total charge. (See also paragraphs 36 (*d*), 101 (*b*), (*e*), (*f*), (*i*), and 108 (*a*).)

SERVICE OF HOSPITALS.

See A. R. 1433, 1434. General hospitals, hospital transports, boats and railway trains controlled by Medical Department.
A. R. 1435, 1436. Responsibilities of senior surgeon of post.
A. R. 1437. Hospital matrons for.
A. R. 1438. Disposal of arms, accouterments and ammunition of patients.
A. R. 1439. Amended, see paragraph 64 infra.
A. R. 1440. Discharged soldiers as patients.
A. R. 708, 1441, 1442. Infected tents, clothing, etc.
A. R. 1443. Hospital property to be used only for hospital purposes.
A. R. 1444. Medical supplies for civilian employees.
A. R. 1445, 1446. Hospital treatment of civilians.
A. R. 1449. The hospital library.
A. R. 1461. Metric system enjoined.

55. When a patient is transferred from the care of one medical officer to another, a report of the case (Form No. 26) will accompany him.

56. Hospital clothing will be worn by patients only during their stay in hospital. Each article will be marked as hospital property. When very sick soldiers are transferred from one hospital to another, the hospital clothing necessary for their comfort may be sent with them, properly invoiced, and accom-

panied by a check list, giving the names of the men in whose possession it is. Under the provisions of this paragraph, crutches and similar articles may, if necessary, be similarly transferred with the patient from one post or hospital to another.

57. Clothing and other articles which can be immersed in boiling water, or a disinfecting solution, without material injury, should be disinfected and not destroyed by burning. Articles destroyed to prevent contagion must be accounted for by a certificate of the officer responsible, setting forth fully the circumstances necessitating such destruction.

(*a*) Whenever articles of clothing of enlisted men have been destroyed upon recommendation of a medical officer to prevent contagion, a gratuitous issue of such articles of clothing will be made to the enlisted men to whom such clothing belonged, upon the certificate of an officer that the clothing was so destroyed upon the recommendation of the medical officer named.

58. The medical officer in charge of a general, post, or camp hospital, hospital ship, or transport carrying patients is authorized to purchase, under the laws and regulations relating to purchases of subsistence stores, such articles of food, both solid and liquid, not carried in stock by the subsistence officer who issues rations to the hospital, and to call upon such subsistence officer for the issue of such quantities of articles from the stock already on hand as in the judgment of the medical officer are required for the diet of enlisted patients under his charge who are too sick to be subsisted on the ration as ordinarily issued; the total combined money value of the stores hereby authorized to be purchased and issued as above in any month not to exceed the rate, calculated on the month's transactions, of forty cents per man per day for those actually requiring special diet. Subsistence officers are authorized to pay all duly certified bills of purchases made by medical officers under the provisions of this order, or to make the purchases themselves at the request of the medical officers and to make issues for special diet hereunder from stores on hand at their request, provided the rate of forty cents per man per day for those enlisted men actually requiring special diet is not exceeded in any month.

(*a*) When a ration has been drawn by the hospital for an enlisted patient for a ration period and it becomes necessary during that period to put him upon special diet, due deductions will be made by the surgeon in charge on the next ration-return of the hospital for the rations unused by him; and reciprocally, when a patient on special diet has been restored in a ration period to regular diet, the necessary additions will be made on the next ration-return of the hospital for the rations used by him. The object of this rule is to prevent the hospital from having the benefit of the rations of enlisted men for the period they may be put upon special diet, and to give the benefit of an issue of rations where men have been restored to regular diet when rations had not been drawn for them.

(*b*) Medical officers having enlisted patients on special diet will make return of such patients at the end of each month on Form No. 69, Subsistence Department, and send the same to the subsistence officer. After the subsistence officer has entered the vouchers for purchases and the articles issued for special diet, and deduced the rate per man per day which the special diet for the month has cost, the certificates at the foot of the form will be duly executed by the medical officer and the subsistence officer; and the medical officer will file with the subsistence officer Form No. 69, and with it the report required by paragraph 569 of the Regulations of emergency or open-market purchases of subsistence stores made by him, which will be made out on Form No. 9 or 9½, Subsistence Department, and signed by him. As articles of special diet authorized by this order are immediately expendable by the medical officers, Form No. 69, when duly executed, will be accepted by the Commissary General of Subsistence as the return of the medical officer for the subsistence stores involved. Purchase vouchers certified by medical officers will state that the stores will be accounted for "on Form No. 69, to be filed with the account current of _____ for the month of _____, 190 ."

(*c*) The formation of a hospital fund from articles purchased for special diet for enlisted men too sick to use the army ration, or the application of such articles to uses other than those for which intended, is prohibited. Such articles

will, as far as practicable, be procured in quantities sufficient for the needs of specific patients only, and no large accumulations will be made. Nothing in this order will be construed to prevent the maintenance of a hospital fund from savings of the rations of the Hospital Corps and the patients who do not require special diet.

(*d*) The medical officer on a vessel of the United States transport service will purchase from the proper transport officer on such vessel, paying for the same from the appropriation "Subsistence of the Army," such articles of subsistence stores as he shall certify are actually needed for the special diet of the sick on board. These stores will be accounted for by the medical officer in the same way as are other articles of diet procured by him for the sick.

59. If hospital treatment is necessary in the cases of recently discharged soldiers who arrive on Government transports in New York City, N. Y., they may be sent to one of the post hospitals in the vicinity; those who arrive at San Francisco, may be sent to the general hospital at the Presidio. Rations may be drawn for such men while undergoing treatment.

60. When a death occurs in a military hospital the case should be entered in the *Record of death and interment*, a copy of which record, with a request that necessary steps be taken for the disposition of the remains, should be sent to the adjutant of the post or station.

61. Surgeons in charge of hospitals (except general hospitals) and all post commanders will, at the end of each month, send to the proper company or regimental commander the name of each officer and enlisted man in the hospital or at the post, other than those belonging thereto, giving the cause of detention, date of arrival, departure, return to duty, or death, or any other information that may be pertinent to the case.

62. Whenever an enlisted man is discharged from the Army prior to the expiration of his term of service the *actual cause of discharge* will be stated in the order directing the same and noted on the final statements.

Officers signing final statements will be careful to observe that these notations are made in all cases, as the cause of discharge determines the soldier's right to travel allowances, and

the mere quotation of the number and date of the order upon which discharge is based is insufficient as a guide to proper payment.

63. Owing to the number of incorrect and incomplete final statements daily presented to paymasters for settlement, it is apparent that the obligations of officers issuing such statements are not fully understood, and the result is great inconvenience to discharged soldiers, who are obliged to return to their late commanding officers to have necessary corrections made, and liability of paymasters to overpay, when the account of the soldier is not fully and properly stated.

In order that there may be uniformity in the issue of final statements, the following instructions, compiled from the Army Regulations, will be strictly observed.

"It should be borne in mind that overpayments caused by erroneous final statements will be charged against the officer who signed the final statements."

Notification of discharge.

(Par. 150, A. R.)

The officer who prepares the final statement of a soldier will, at least one day before the discharge takes effect, send by mail to the paymaster to whom the soldier may wish to apply for payment a notification in his own handwriting, in form as follows:

"Major ——, Paymaster U. S. Army,

"SIR: I have the honor to advise you that Private ——, Co. ——, —— Regt. ——, will be discharged the service of the United States on ——, 190–, by reason of ——." (Here state the reason.)

"The soldier was last paid to ——, 190–, and has pay due him from that date to date of discharge.

"There is due him for clothing not drawn in kind, $——," or "He is indebted to the United States for clothing overdrawn, $——. He is indebted to the United States for C. & G. E., $——. For court-martial forfeiture, $——.

"The soldier is (or is not, as the case may be) entitled to traveling allowances.

"His signature appears below.

"(Soldier's signature:)

—— ——.

"Very respectfully,

—— ——,

"(Surgeon's signature and rank.)"

Soldiers are discharged for the following reasons.

(Par. 140, A. R., and G. O. No. 100, A. G. O., 1898.)

1. By order of the President or the Secretary of War.

2. By sentence of a general court-martial.

3. On surgeon's certificate of disability by direction of the commander of a territorial department or army in the field. Department and corps commanders are authorized to order discharge on certificates of disability, such orders to be carried out by the regimental, independent battalion, battery, or detachment commander, as the case may be, and the final statements should show the authority for discharge and whether or not the disability was caused by the soldier's own misconduct. The requirements of G. O., No. 100, A. G. O., 1898, should be carefully observed. See paragraph 67 infra.

4. In compliance with an order of one of the United States courts, or a justice or judge thereof, or on a writ of habeas corpus.

5. By expiration of term of service.

Under the head of "Remarks" the notation "Service honest and faithful," or "Service not honest and faithful," as the case may be, must appear.

Travel-pay is forfeited.

1. By dishonorable discharge, per sentence of court-martial.

2. When soldier is discharged as a minor, or for other cause involving fraud on his part in the enlistment.

3. When, at date of discharge, the soldier is in the hands of civil authorities and undergoing imprisonment.

4. When discharged before expiration of term of enlistment through fault of his.

5. When discharged by order of the Secretary of War, or by corps or department commander, for disability caused by his own misconduct.

6. When discharged by way of favor, as "to enable him to accept a commission."

If for any of the above causes the soldier is not entitled to traveling allowances, the notation, "not entitled to traveling allowances," must appear, and the authority for the same must be stated.

Clothing account.

Settlement must be made by the surgeon, and the balance "due the United States," or "due the soldier," must be stated.

64. *A. R. 1439, amended G. O. 31, A. G. O., 1899.*—"When a soldier in hospital is detached from his company, his company commander will send to the hospital his descriptive list. The surgeon in charge will enter thereon all payments, stoppages, and the money value of all clothing issued, and when the soldier is returned to duty, transferred, discharged, dies, or deserts, a new descriptive list containing a complete statement of his accounts will be sent to his company or other commander, and the original will be retained by the officer in command of the hospital for his own protection. If the soldier is discharged from the service while in hospital, the

surgeon will furnish him with final statements and notify the Adjutant General of the Army and the company commander of the date, place, and cause of discharge. If the soldier die in hospital, the surgeon will take charge of his effects and make the reports required in paragraph 158."

(*a*) When a soldier, detached from his command, dies in any hospital it is the duty of the surgeon in command or in charge to comply with the requirements of A. R. 158, amended to read as follows:

When a soldier is killed in action or dies at any post, hospital, or station, it shall be the duty of his immediate commander to secure his effects and to prepare the inventory required by the 126th article of war, according to prescribed form, *and to notify nearest relative of the fact of death.* Duplicates of the inventory, with final statements, will be forwarded direct to the Adjutant General of the Army.

65. Soldiers who are sick in the division or brigade hospitals of their command at date of muster will be mustered on the muster rolls and the pay rolls of the organization to which they belong as "present," with the remark "sick in division or brigade hospital." If the organization to which they belong be detached from the corps, division, or brigade, they will be mustered on detachment rolls (Form No. 2), a separate roll being prepared for each regiment. (See Note 1 on the rolls and A. R. 785, the provisions of which must be strictly observed.)

66. Cases of hernia suitable for an operation should receive surgical treatment. Operations for the radical cure of hernia will be performed by medical officers specially designated by the Surgeon General. Medical officers will report cases of hernia considered favorable for operation to the Surgeon General. If the case is considered unsuitable for operation, the fact will be noted upon the certificate of disability.

CERTIFICATES OF DISABILITY.

See A. R. 140, 141. Discharges of enlisted men on.
A. R. 154. Blank forms and instructions.
A. R. 155. When disability is not permanent.
A. R. 156. Report of discharge effected on.
A. R. 157. In cases probably pensionable.
A. R. 174. For admission to soldiers' home.
A. R. 470. For insane soldiers.
A. R. 844, 847. Discharge of recruits on.

67. In the examination of certificates of disability for discharge, it is enjoined upon the chief surgeons, and others accountable, to observe that there is no conflict between the reports of company commanders, medical and other officers thereon, as to whether disability was incurred in line of duty, or not in line of duty. If any discrepancies exist in this particular, every possible means will be employed to harmonize the reports before finally forwarding the papers to the Adjutant General of the Army. (G. O., No. 100, 1898.)

68. In cases of discharge of enlisted men on surgeon's certificate of disability, the certificate of the surgeon will be filled out in his own handwriting.

HOSPITAL FUND.

See A. R. 300, 1259, 1269, 1270. Its constitution.
A. R. 315. Seeds for post garden purchased from.
A. R. 1446. Civilians in hospital.
A. R. 1447. Amended by G. O. No. 119, 1900, as in paragraph 69 infra.
A. R. 293, 1448. Its expenditure.

69. *A. R. 1447 amended.*—Hospital charges will be as follows: For subsistence of a retired enlisted man, forty cents per day; for nursing, medicines, and subsistence of a civilian employee, forty cents per day; for officers of the Army, seamen, and river boatmen (admitted only on permit issued by a medical officer of the Marine-Hospital Service or a customs officer), and civilians admitted as provided in paragraph 1446, one dollar per day. The money received will be accounted for with the hospital fund. (See also 58 (*c*).)

70. A statement of the hospital fund and return of durable property in the prescribed form (Form No. 35) will be forwarded by the surgeon at the end of each month and when relieved from duty, to the chief surgeon, who upon examination and approval will forward it to the Surgeon General.

71. Chief surgeons may grant authority for the purchase of articles, including cows and articles of durable property, required for the use of the sick in hospital and for the Hospital Corps, when satisfied that they are proper charges against the hospital fund. In general terms, they should regulate the disbursements from the hospital fund in the interests of the sick.

72. Officers of the Medical Department will be held to a personal accountability for the loss of any portion of the hospital fund not deposited and locked in the cash box of the hospital safe. Any change in the combination of the lock of the hospital safe will be immediately reported to the Surgeon General.

73. Gratuities to hospital cooks may be authorized by chief surgeons when the amount of the hospital fund on hand justifies such an expenditure, viz:

(*a*) At posts where the number of patients treated in hospital averages less than five daily, ten cents per day; where the number averages more than five daily, twenty cents per day; where the number averages more than ten daily, a gratuity of ten cents per day may also be paid to a second cook.

(*b*) A gratuity of not exceeding ten dollars may be paid from the hospital fund to the hospital gardener, when approved by the Surgeon General.

(*c*) Chief surgeons will instruct the medical officers serving in their respective departments, when granted authority to pay gratuities, to quote on the statement of the hospital fund the date and source of such authority.

(*d*) In making out a statement of the hospital fund all receipts and expenditures must be entered in detail, *i. e.*, quantity, price per pound, can, etc.

(*e*) All indebtedness properly chargeable to the hospital fund will be recorded upon each monthly statement; ordinarily there should be no indebtedness, but any that may occur must appear in detail.

(*f*) Should there be no hospital fund on hand, a blank statement will be forwarded, reporting the fact.

(*g*) Necessary transfers of the hospital fund from one post to another will be made by the Surgeon General only.

(*h*) Vouchers for purchases of articles from the hospital fund will not be forwarded with the statement.

(*i*) Receipts for money expended will be taken by the surgeon of the post, or officer in charge of the hospital, and retained at the hospital.

(*j*) Statements of the hospital fund will show the names or designations of the firm or parties from whom articles are purchased for the use of the sick in hospital. The purchase

from the hospital fund of liquors (wines, beer, etc.), except for the use of the sick in hospital, will not be approved.

(*k*) Surgeons in charge of hospitals will exercise due care in their expenditures, and will strive to maintain a sufficient fund for all emergencies.

(*l*) Articles of durable property purchased with the hospital fund, worn out or unfit for use, may be dropped, destroyed, or sold by authority of the chief surgeon. The proceeds of sales of such property will be accounted for on the next statement of the hospital fund.

(*m*) Should no durable property be on hand, the words "no property on hand" will be written across the face of the return when forwarded.

(*n*) Invoices and receipts for durable property purchased or expended will not be required by the Surgeon General. The transfer of fund and property will be acknowledged by receipts written across the face of the last statement and return sent to the Surgeon General.

MEDICAL ATTENDANCE.

See A. R. 1450, 1451. By medical officers.
A. R. 1452, 1459. By civilian physicians.
A. R. 1453, 1456, 1458. Accounts for attendance by civilian physicians.
A. R. 1454, 1455. Accounts for prescriptions.
A. R. 1457. Treatment in private hospitals.
A. R. 1461.

74. The family of an officer will be understood to include his wife, minor children, and other dependent members of his household, including servants.

75. Civilians employed in post exchanges are held to be entitled to the privileges of medical and hospital attendance and purchase of medicines allowed civilian employees under A. R. 1444, 1445, 1447, and 1450.

76. If citizens residing in the neighborhood of a military post desire the professional attendance of an Army medical officer, it is regarded as not inconsistent with the requirements of the regulations governing the Army for such officer to render his services, when this does not interfere with the proper performance of his official duties. But the establishment of an office outside of the limits of a military post for the purpose of engaging in civil practice is prohibited.

MEDICAL SUPPLIES.

See A. R. 1460. Purchase of.
A. R. 1461. Metric system to be used.

77. Medical officers in charge of medical supply depots will purchase and distribute medical and hospital supplies. In cases of emergency, articles not on hand will be purchased in small quantities to fill duly approved requisitions, without waiting for the approval of the Surgeon General.

78. The Supply Table enumerates the medical supplies issued to the Army, and the quantities and sizes of original packages. The Medical Department will supply, from time to time, new remedies of determined therapeutic value; but newly introduced remedies, desired only for experiment, and such as offer no manifest advantage over those already issued, will not be supplied. These supplies are selected for the *military service*, and it is believed that all necessary articles are included, and that the quantities allowed will be found sufficient under ordinary circumstances. Requests for particular preparations simply because they are agreeable to the taste, or to save trouble in compounding, will not be approved; nor will preparations of a drug be furnished when one or more practically equivalent ones are on the Supply Table. (See paragraph 208.)

REQUISITIONS.

79. The senior medical officer of every post will make annual requisition for medical supplies for the year commencing January 1, unless another date is fixed by the Surgeon General. The requisition will be made in triplicate and forwarded to the chief surgeon; or, in the case of independent posts, in duplicate, to the Surgeon General.

(*a*) Chief surgeons will see that annual requisitions do not call for any article not on the Supply Table, nor for quantities in excess of those therein allowed. They will forward one copy to the Surgeon General, one, with their approval, direct to the medical supply depot designated by the Surgeon General for issue, and will retain one.

80. Annual requisitions will be forwarded to the chief surgeon within twenty days before the date at which the period they cover begins. They will be made only for articles that

are, or probably will be, needed during the year; will state the quantity of all articles on hand, *as verified by a medical officer* in accordance with paragraph 90, and will give the total number of persons entitled by regulations to medicines. Quantities on hand will be deducted from the quantities allowed by the Supply Table. The quantities asked for will be computed on the basis of original packages.

(*a*) Chief surgeons at their inspections will carefully investigate the method of preparing requisitions, particularly as to the necessity for the quantities asked for and the accuracy with which the quantities on hand are stated.

(*b*) Requisitions for supplies for temporary posts or for those soon to be abandoned will be confined to such articles as are absolutely necessary.

(*c*) Subposts and camps will, in the absence of orders to the contrary, obtain such medical supplies as may be required by requisition upon the senior medical officer of the post to which they are subsidiary, who will issue them after approval by the chief surgeon.

(*d*) The smaller posts will not require all the articles included in the Supply Table, and the local prevalence or rarity of certain diseases, as well as the quantity or number on hand of each article, will be considered in the preparation and approval of requisitions.

81. When medical supplies are absolutely necessary before the annual requisition is made they will be asked for upon a special requisition, in triplicate, giving a list of the articles needed, and the quantity of each on hand, and the reasons for the necessity of such requisition. These will be transmitted through the chief surgeon, who will retain one copy and will forward two to the Surgeon General.

(*a*) Chief surgeons will personally and carefully scrutinize these requisitions, and will make such changes as they may deem proper.

82. In all returns, requisitions, invoices, and receipts pertaining to medical supplies, the nomenclature, order of entry, and classification of the Supply Table will be strictly followed, and all copies will be carefully compared. They will be forwarded without letters of transmittal.

83. In cases of emergency, as sudden epidemics, not admitting of delay, chief surgeons are authorized to act upon special requisitions, forwarding one copy, with their action, to the nearest medical supply depot, one to the Surgeon General, with an indorsement stating the circumstances, and retaining one; but requisitions for articles not on the Supply Table must, in all cases, be forwarded to the Surgeon General for his action.

(*a*) When, as a result of the prevalence of an epidemic, or for any other reason, necessary supplies are likely to be exhausted, timely requisition must be made for additional supplies. Medical officers will be held accountable for any suffering which may result from their failure to ask for supplies when it is evident that they will be needed.

TRANSFER OF MEDICAL SUPPLIES.

84. Officers transferring medical supplies will prepare invoices (Form No. 18) in duplicate, one for the Surgeon General and one for the receiving officer. The receiving officer will prepare receipts (Form No. 19) in duplicate, one for the issuing officer and one for the Surgeon General. The vouchers for the Surgeon General will be promptly forwarded after the transfer is completed. A packer's list (Form No. 17) will, if necessary, be furnished by the issuing officer.

85. Great care should be exercised before receipting for cases of instruments, microscopes, and other property of similar character not enumerated on the property papers in detail, to ascertain that the full contents of such cases are present and in good order. Incomplete cases will be receipted for as such, and a list of the missing instruments, etc., will accompany the receipt in order that the proper officer may be held accountable for the deficiency.

(*a*) Receipts, without remark, for cases of instruments and similar property will be considered as evidence that they are complete and in accordance with the lists of contents as given in the Supply Table, and the receiving officer will be held responsible in accordance therewith.

(*b*) The issuing officer will enter on his invoices, and the receiving officer on his receipts, the condition of all articles not serviceable.

86. Medical officers will report to the Surgeon General and to the issuing officer all defects observed in the quality, quantity, or packing of medical supplies. They are requested to freely communicate to the Surgeon General any suggestions tending to the improvement of medical supplies, appliances, etc., and to make reports as to new designs of apparatus, field equipment, etc.

87. Medical officers will take up and account for all medical property of the Army that comes into their possession, and will report, when possible, to whose account it is to be credited.

(*a*) Officers will be held responsible for the serviceable and complete condition of all property in their possession, except such as may have been rendered unserviceable by fair wear and tear.

(*b*) In the absence of a medical officer the officer designated to take charge of medical property (A. R. 659) will sign all property and administrative papers.

ACCOUNTABILITY.

88. When nonexpendable articles (see par. 208) are lost or destroyed, the circumstances of the loss or destruction must be fully set forth in a certificate from the officer responsible for the property, or in a certificate of a commissioned officer cognizant of the facts, or, in the absence of these, in an affidavit of a noninterested person. If the evidence is considered satisfactory by the Surgeon General, the responsible officer will be so informed and authorized to drop the articles from his returns. If not satisfactory, he will be required to replace them at his own expense.

89. Surgical instruments and appliances that require and are considered worth repairing will be reported to the Surgeon General through the chief surgeon, with a statement of the repairs needed. When requisition is made to complete a broken or imperfect instrument or apparatus, the name of the maker will be given. Instruments of different makes have been issued, and such information is required to insure the proper pattern and fit of the parts asked for.

90. The responsible officer will cause all instruments in his charge to be examined by a commissioned medical officer at least once each month. He will also once each year cause all

medical property in his charge to be carefully examined by a commissioned medical officer, and verified by the returns, invoices, etc.

91. Officers will report to the Surgeon General such articles of furniture as may need and are considered worth repair or renovation by painting, varnishing, etc. This should be done by post labor if practicable, request being made for authority to purchase necessary material. If not practicable, the officer will obtain one or more estimates in detail of cost of repair or renovation of such furniture, and forward them through the chief surgeon for the action of the Surgeon General.

92. Articles issued to posts shall not be taken away by the officer on being relieved, nor when availing himself of a leave of absence, except by authority of the Surgeon General or of a chief surgeon.

RETURNS OF MEDICAL PROPERTY.

93. Officers in charge of medical property will prepare annually, on December 31, unless another date is fixed by the Surgeon General, or when relieved from the charge thereof, returns of medical property (Form No. 20) in duplicate, showing those articles on hand at last return, those received, expended, issued, and sold, and those remaining on hand. The original of this return will be promptly transmitted to the Surgeon General. The duplicate, with a complete set of vouchers, will be retained for the protection of the officer responsible for the property.

(*a*) In exceptional cases a certified invoice may be offered by the issuing officer, in the absence of a receipt, as a substitute for the proper voucher, together with such additional evidence as he may possess in regard to the issue.

(*b*) No interlineations or erasures will be made on the returns, and all articles not provided for in the printed headings will be entered in proper order under the heading of additional articles.

(*c*) In invoicing or accounting for broken packages, such as bottles, jars, etc., fractions will be given as $\frac{1}{4}$, $\frac{1}{2}$, $\frac{3}{4}$.

UNSERVICEABLE PROPERTY.

See A. R. 608, 615. Proceeds of sales of.
A. R. 609. Certificates of deposit. See paragraph 96 infra.
A. R. 679. Method of sales of.
A. R. 878. By whom inspected. See paragraph 97 infra.
A. R. 882. Disposition of inventories. See paragraph 98 infra.
A. R. 886. Destruction of. See paragraph 99 infra.
A. R. 888. Action on inspection reports by. See paragraph 100 infra.
A. R. 1463. Not to be presented for condemnation until authorized by the Surgeon General.

94. Applications to submit unserviceable instruments, books, etc., for the action of an inspector will be forwarded in duplicate to chief surgeons of departments, who are authorized to act upon them.

95. When condemned medical property is sold at public auction the officer responsible therefor will prepare an account of sales (Form No. 9) in duplicate. He will also prepare an invoice (Form No. 10) in duplicate, of the articles sold. The original of this account of sales, accompanied by the original invoice and a copy of the inventory and inspection report, will be sent at once to the Surgeon General; the duplicate copies of each will be filed by the officer with his retained set of vouchers. In addition, one "Account of Sales at Auction," required by the accounting officers of the Treasury, will be prepared on a form furnished by the Surgeon General, and be sent to him with the accounts above called for and proper subvouchers. Should it be necessary to incur any expenses in connection with such sales they will be paid out of the total receipts before depositing the latter, in which case the expenses will be supported by properly prepared and receipted vouchers attached to the account of sales.

96. A. R. 609, amended (by G. O. 49, 1900) to read as follows:

The "originals" of all certificates of deposit are required by law to be forwarded by the depositaries direct to the Secretary of the Treasury; the "duplicates" are filed by the depositing officers with their retained papers. Immediately upon making a deposit to the credit of the Treasurer of the United States the depositing officer will notify the proper chief of bureau of the fact, stating the number of the certificate of deposit, the name of the depository, the date of the deposit, the amount, the appropriation to which the money pertains,

and whether the amount arose from proceeds of sales or is a repayment of an unexpended balance. If the deposit is on account of the indebtedness of any person other than the depositing officer, the source from which the money was derived and the object of the payment will be distinctly stated and reference made to the vouchers, if any, to which the deposit pertains.

97. A. R. 878, amended (by G. O. 91, 1898) to read as follows:

Inspections having in view the condemnation of property will be made by inspectors general, acting inspectors general, or officers especially designated by the commander of a department, the commander of an army corps, or army in the field, or higher authority. Officers designated for the foregoing purpose shall not be in any way connected with the staff department or corps, the post, or particular organization to which the property to be inspected pertains, except in case of unserviceable public animals or of small quantities of rapidly deteriorating subsistence stores, unfit for sale or issue to troops but not worthless, if delay would entail loss to the Government.

98. A. R. 882, amended (by G. O. 91, 1898) to read as follows:

Inspectors will examine all property properly presented for condemnation. When all property presented has been destroyed in the presence of the inspector, one inventory will be forwarded by the inspecting officer through department or army corps headquarters to the Inspector General of the Army and the others will be delivered to the accountable officer. In cases in which the inspector recommends the sale of any property or its transfer to depots, he will forward all the inventories to department or army corps headquarters, and if the inspector's action is approved by the department or army corps commander, except as provided in paragraphs 1525 and 1526, two will be returned to the accountable officer and the other forwarded to the Adjutant General of the Army to be transmitted to the Inspector General of the Army, and, in similar cases, when the accountable officer is not serving under the department or army corps commander and all the property has been destroyed in the presence of the inspector, one copy of the inventory will be forwarded to the Inspector General of the Army and two to the accountable officer, or if sale or transfer of the property is recommended, the inspecting

officer will forward all the inventories to the Inspector General of the Army, who will forward them to the Secretary of War, through the chief of bureau concerned; one copy will be returned to the Inspector General and two to the accountable officer.

99. A. R. 886, amended (by G. O. 151, 1898) to read as follows:

Inspectors will, when practicable, cause the destruction, in their presence, of all property found to be worthless and which is without money value at or near the place of inspection, and will state in their reports that "the articles recommended to be destroyed have no money value at or near the post." The action of an inspector on property of this character will be final, and his report will be a valid voucher for the responsible officer. Inspectors will be held responsible for their action in this particular. When property thus condemned is not destroyed in the presence of the inspector the responsible officer will certify to the fact of subsequent destruction in his presence.

100. A. R. 888, amended (by G. O. 91, 1898) to read as follows:

Department commanders, the commander of an army corps or army in the field, or the Commanding General of the Army, may give orders, on the reports of authorized inspectors, to sell, destroy, or make such other disposition of condemned property as the case may require, except the sale of ordnance and ordnance stores and the destruction of saddles issued by the Ordnance Department, for which the orders of the Secretary of War must be given. If the property be of considerable value, and there be good reason to suppose that it can be more advantageously applied or disposed of elsewhere than within the command, the matter will be referred to the War Department through the Adjutant General of the Army.

USE OF MEDICAL PROPERTY.

See A. R. 1443. Hospital property not to be used for other than hospital purposes.

101. Chief surgeons will report every violation of A. R. 1443; but it is not to be construed as prohibiting medical officers from taking books and instruments from the hospital when necessary.

(*a*) Under no circumstances will hospital bedding be used except within the hospital to which it has been supplied; nor will it be used by members of the Hospital Corps, except when on duty in the wards.

(*b*) The issue of soap or lye to hospital matrons for laundry use is not authorized.

(*c*) The issue of articles for use in the preparation of cleaning mixtures, cosmetics, perfumery, use with spirit lamps, etc., is strictly prohibited.

(*d*) The exchange of medicines with druggists is prohibited.

(*e*) Blankets not in use should be frequently examined, and occasionally shaken and hung out of doors. When stained and soiled, but otherwise in good condition, they should be washed and continued in service. When deemed necessary, authority will be given to have them washed at a steam laundry, if one is near the post.

(*f*) Laundry appliances will not be supplied to post hospitals. Washtubs will be furnished for the purpose of soaking sheets, clothing, etc., in disinfecting solutions.

(*g*) Cocoa matting, in strips 1 meter wide, is supplied for use on the floors of halls, but not for use on stairways or in wards. It should be laid in one strip, and zinc ends will be issued as required, two for each strip. It should not be nailed to the floor.

(*h*) Rubber and flexible catheters and bougies will be kept in the catheter box, using talc (French chalk) or glycerin to preserve them.

(*i*) Pieces of canvas of the proper size for litters will be issued, as required, to replace pieces that may become torn or unserviceable. If soiled, the canvas will be removed from the litter, washed, and replaced.

VACCINE VIRUS.

102. Requests for vaccine virus will be made direct to the Surgeon General by information slip. On account of its liability to become inert from various causes, especially from heat, it will be asked for in such quantities only as are needed for early use.

DISINFECTANTS.

See A. R. 1642. Prohibits routine issue of.

103. Disinfectants are issued, as are medicines, to be used by medical officers when actually required for some specific purpose. Chloride of lime, carbolic acid, and mercuric chloride are issued by the Medical Department for use as disinfectants, properly so called. A solution containing four per cent of good chloride of lime, or five per cent of carbolic acid, is suitable for disinfecting the excreta of patients with cholera or typhoid fever, or the sputa of patients suffering from diphtheria, scarlet fever, or tuberculosis. The floors, furniture, etc., in rooms occupied by patients suffering from an infectious disease may be washed with a two per cent solution of carbolic acid, or with a solution of mercuric chloride of 1-1000. Soiled bed linen, underclothing, etc., used by such patients should be immersed in one of the above-mentioned solutions before it is sent to the laundry. *But in the absence of any infectious disease, these disinfecting agents are not required, and their expenditure for purposes of general post sanitation is not authorized.*

(*a*) The necessity for the use of antiseptics and deodorants is a reproach upon the sanitary police of a post, and should only be required under exceptional circumstances. The alvine discharges of healthy persons do not require disinfection and, when properly disposed of, do not require treatment with any chemical agent whatever. If water-closets or earth closets are offensive, this is due to faulty construction, to insufficient supply of water or dry earth, or to neglect of ordinary cleanliness. The attempt to remedy such defects by the systematic use of antiseptics is expensive and unsatisfactory in its results. The same is true of foul drains, bad-smelling urinals, accumulations of garbage, etc. The proper remedy for such conditions is cleanliness and strict sanitary police.

104. When accumulations of organic material undergoing decomposition can not be removed or buried, they may be treated with an antiseptic solution or with freshly burned quicklime. Quicklime is also a valuable disinfectant, and may be substituted for the more expensive chloride of lime

for disinfection of typhoid and cholera excreta, etc. For this purpose freshly prepared *milk of lime* should be used, containing about 1 part, by weight, of hydrate of lime to 8 of water.

(*a*) During the prevalence of an epidemic, or when there is reason to believe that infectious material has been introduced from any source, latrines and cesspools may be treated with milk of lime, in the proportion of 5 parts to 100 parts of the contents of the vault, and the daily addition of 10 parts for 100 parts of daily increment of feces.

(*b*) Quicklime should be purchased in such quantities as may be necessary for the purpose of carrying out these instructions, and vouchers sent to the Surgeon General of the Army for payment from the medical and hospital appropriation; but the issue of lime at the expense of the Medical Department for whitewashing buildings not infected or as a deodorant for stables is not authorized.

STERILIZED DRESSINGS.

105. Sterilized dressings will not be issued for post use. Their preparation is so simple and so well understood that they should be prepared as needed. First-aid packets will be reserved exclusively for field use, except those issued for instruction.

FIELD APPLIANCES.

106. Field furniture will not be used at posts, except when required for the instruction of men of the Hospital Corps.

(*a*) Medical and surgical chests will be frequently inspected and kept in perfect order for immediate field use. Under no circumstances will their contents be used at posts.

107. In time of war every officer and enlisted man will be furnished a first-aid packet by the Medical Department.

(*a*) For purposes of instruction first-aid packets will be obtained by the surgeons of posts, upon special requisitions, and will be supplied by them to company commanders. The allowance for this purpose will be twenty packets for each company of infantry, battery of artillery, or troop of cavalry. The dressings contained in these packets can be used repeatedly for the practical instruction of officers and enlisted men,

and after being used for this purpose they should be repacked in the original form.

(*b*) First-aid packets are expendable, but care should be exercised to prevent any unnecessary expenditure; officers will be held strictly accountable for their proper and economical use.

WINDOW CURTAINS, SCREENS, AND BOOKCASES.

108. When window curtains and fixtures, window and door screens, and portable bookcases are required, the requisitions therefor will be special, and should be accompanied by an estimate of the cost of making suitable articles at or near the post. Wire netting will be furnished to repair such window and door screens as have become unserviceable.

(*a*) When the present supply of bed screens is exhausted no more will be issued. When required, application will be made to have frames constructed at the post, giving estimate of the cost; they will not in future be covered with holland, but sheets will be placed on the screens and frequently washed.

PRESCRIPTIONS.

See A. R. 1461. Metric system to be used.

109. All prescriptions will be placed on file at the hospital; those for liquors will be placed on a separate file.

CHEMICAL AND BACTERIOLOGICAL SETS.

110. Officers to whom chemical and bacteriological sets are furnished will make an annual report on December 31, showing what use has been made of them.

ARTIFICIAL LIMBS.

See A. R. 1467. Persons entitled to.
A. R. 1468. Transportation to be fitted.

111. Application for an artificial limb or for its commuted value should be made by the claimant direct to the Surgeon General, War Department, Washington, D. C.

METEOROLOGICAL INSTRUMENTS, OBSERVATIONS, AND REPORTS.

112. Meteorological observations will be taken at such posts as may be designated by the Surgeon General, to whom a

report will be rendered promptly at the end of each month, on the form furnished by the Director of the State Section of the Weather Bureau, and through the office of the said director. Such meteorological instruments as are required for use at designated posts will be obtained by application to the State section director; and when any of these instruments become broken or unserviceable the request for new ones will state the circumstances attending the breakage, and, if a thermometer, the parts of the instrument will be returned by mail to the office of the State director. Receipts for these instruments will be made out by the post surgeon, on forms transmitted with the instruments. When relieved from duty at a station, the surgeon will notify the State officer, in order that the responsibility for the property may be properly transferred. Meteorological instruments heretofore issued by the Medical Department will be borne upon the returns of medical property until broken or worn out, but articles furnished by the Weather Bureau will not be taken up on these returns.

ICE MACHINES.

113. Ice machines are issued to such southern posts as are unable to obtain, by purchase, ice for the use of the sick. They are furnished by the Medical Department to supply ice for the sick in hospital, and not for the comfort or convenience of the garrison at large. They will be accounted for and invoiced in detail.

114. Medical officers will pay special attention to the details of the manufacture of ice, both as to the proper management of the apparatus and to the financial results from the sale of ice, and will be held responsible for the condition of these machines and the results obtained.

115. In order to provide for the maintenance of the apparatus in complete running order, and to promptly pay bills incurred for repairs, a fund of at least three hundred dollars will be kept constantly on hand. When this fund is reduced by necessary expenses, such change will be made in the price at which ice is sold as will speedily restore it to the above minimum amount. The fund will be used for the following purposes only:

(*a*) Running expenses proper, and repairs; fuel, when it can not be otherwise obtained; purchase of oil, ammonia, etc. When renewal of heavy parts of the apparatus is required, application will be made to the Surgeon General to secure their transportation. The purchase and transportation of ammonia in reservoirs will be paid for from the ice fund. Great care will be exercised to obtain such articles in time to allow of their shipment as freight, and not by express, and before the regular working of the apparatus is prevented by their absence.

(*b*) An engineer and one assistant is usually a sufficient force to run an ice machine. No fixed rate can be made as to the compensation of the engineer, that being regulated by circumstances.

(*c*) The detail, on special duty at the ice machine, of one enlisted man is authorized, and he may be paid a gratuity of not exceeding fifty cents per day.

(*d*) The purchase from the ice fund of articles which may be bought from the hospital fund is prohibited. In exceptional cases, authority for a temporary transfer of money from the ice fund to the hospital fund may be obtained by application to the Surgeon General, setting forth fully the reasons for such request; but, if given, the authority will not be considered as constituting a precedent for such transfers. Bills incurred will be filed at post as vouchers.

(*e*) Payment for the delivery of ice is not considered to be a proper charge against the fund. If it can not be delivered in a garrison free of expense, it should be issued only when called for at the place of manufacture. Payment for the collection of bills for ice furnished is also unauthorized.

116. The price at which ice is sold will be fixed by the medical officer in charge, subject to the approval of the chief surgeon. It may vary from month to month, according to the amount of and demand upon the ice fund.

117. After freely supplying the hospital, ice should, as a rule, be sold to companies, to officers, to the commissary of the post for the preservation of fresh beef, and to enlisted men and their families, at a certain price; to the post exchange and to quartermaster's employees at a somewhat higher price; and to civilians not in Government employ at a still higher price.

The gratuitous issue of ice, except to the hospital and to patients entitled to medicines and medical attendance for whom it may be specially prescribed, is unauthorized.

118. When the officer responsible for the fund is relieved from duty, its transfer will be acknowledged by receipts written across the face of the last statement sent to the Surgeon General, and of the one retained at post. The ice machine will be accounted for in accordance with regulations.

MEDICAL BOOKS AND JOURNALS.

119. Such new books as may be selected by the Surgeon General will be furnished without requisition.

120. The library of the Surgeon General's office is intended for reference rather than for circulation, but books that can be readily replaced will be loaned to medical officers of the Army, they being held responsible for the safe return of the volumes within two weeks from the day of their receipt. In special cases this time may be extended.

121. Medical journals and periodicals issued by the Surgeon General are to be considered as belonging to the hospital or station to which they are sent. They will be kept on file, and medical officers, on taking station, will ascertain that the files are complete. When a post is discontinued, a list of journals and periodicals will be sent, through the chief surgeon, to the Surgeon General, who will give directions as to their disposition.

ABANDONMENT OF POSTS.

122. Unless modified by special instructions from the Surgeon General, the following general rules will be observed in the disposition of medical property upon the abandonment of the post:

(*a*) Medicines, dressings, clothing, bedding, and miscellaneous articles in good and serviceable condition should be sent to other posts in the department.

(*b*) Unserviceable property should be submitted to the action of an inspector, with a view to final disposition by sale or destruction.

(*c*) Only such nonexpendable articles as are in perfect order, including recent medical works, and all instruments which can

not be transferred to other posts without unnecessary duplication, should be turned into a medical supply depot.

123. When a post is abandoned or a detachment is broken up, the medical officer will report the fact to the chief surgeon, and after completing all current reports, will forward them to the Surgeon General, together with the Clothing Book, Descriptive and Deposit Book, and Muster and Pay Rolls, and all official papers, records, and record books pertaining to the Medical Department of the post.

SUPPLY DEPOTS.

124. Medical officers in charge of supply depots will keep the following books of record, and turn them over to their successors: Record of letters received, of letters sent, of moneys received, of moneys disbursed, of orders given for medical stores, of articles received, of articles expended, of articles on hand, of requisitions, of issues, of invoices of packages turned over to the Quartermaster's Department, of contents of packages, and of employees.

125. Medical officers in charge of supply depots will prepare at the end of each quarter—

(*a*) A return, in duplicate, of medical property (Form No. 14).

(*b*) A quarterly abstract of receipts and issues (Forms Nos. 11, 12, and 13) in duplicate.

DISBURSING OFFICERS.

See A. R. 579–656.

126. Medical officers detailed as disburing officers will pay accounts against the Medical Department contracted by them. They will pay accounts contracted by other officers only when the same shall have been approved by the Surgeon General; except that routine accounts due to creditors residing in the insular possessions, or Alaska, may be paid by the disbursing officers there upon the approval of the chief surgeon of the military division or department in which the accounts were incurred. They will forward with every account for supplies purchased and paid for by them, or paid for on the approval of the chief surgeon as above, an invoice of articles received by purchase (Form 5); but no invoice is required with prescription accounts paid for on Forms 21 and 22.

ARMY MEDICAL MUSEUM.

See A. R. 1130. Shipment of articles for.

127. Medical officers and others interested in the progress of medical science are invited to make contributions to the Army Medical Museum. Medical officers who have the opportunity are expected to collect and send interesting medical and surgical specimens, especially those that illustrate tropical diseases and those that show the effects of modern firearms and of the more primitive weapons that still are employed in warfare. Examples of the arms, dress, domestic implements, articles of diet, and of medicine, when any of these differ from those used by the white race in the United States, would be acceptable. Also specimens of poisonous insects and reptiles, and their influence on animal life are desired.

Soft tissues are preferably placed in a twenty per cent solution of commercial formaldehyde (or formalin); the specimen being completely covered by the solution. The fluid on very soft tissue, or large masses of tissue, such as the liver, spleen, etc., should be changed after two or three days. When formalin is not obtainable, commercial alcohol may be used. Bones and joints, after having been roughly cleaned, may be simply wrapped in a cloth wet with the preservative solution, and then again wrapped in oil paper or silk.

Since glass and earthenware vessels are liable to be broken in transit, the use of tin vessels is recommended, the covers to be tightly soldered on. Whatever vessel is used should be packed in sawdust, excelsior packing, stiff paper, or equivalent substitute, in a wooden box. Small dry specimens may be sent by mail; and small wet specimens also, if inclosed in the boxes which have been approved by the Post Office Department.

Each specimen should be tagged with a slip of wood having written upon it in pencil for identification a number or letter, the name of the donor, the date and place of collection, and if practicable, a brief description of the specimen itself. Ordinary pencil marks upon wood are not affected by alcohol or formalin. A letter of advice reporting the mark on the specimen, briefly describing it, and if possible giving its history should be sent direct to the Museum. The more complete the history the more acceptable it will be.

(*a*) Although paragraph 1130, A. R., provides for the transportation of all such contributions through the Quartermaster's Department, it should be known that if the importance of the object, or security demands a more prompt delivery, the package may be sent by express to the curator of the Museum, by whom the charges will be paid. The receipt of every package will be duly acknowledged, and be credited to the contributor.

REPORTS AND RETURNS.

See A. R. 1393. The sanitary report.
A. R. 1464. Return of medical officers.
A. R. 1466. Lists of wounded.

128. The senior surgeon of each hospital, post, regiment or detachment will prepare and forward the following reports:

(*a*) *Daily.*—(1) Report of sick and wounded, for the commanding officer; (2) report of the detachment of the Hospital Corps, for the commanding officer.

(*b*) *Monthly.*—(1) Sanitary report, paragraph 132; (2) report of sick and wounded, paragraph 169; (3) return of the Hospital Corps, paragraph 36; (4) monthly statement of the hospital fund and return of durable property, paragraph 70; (5) report of meteorological observations, paragraph 112; (6) report of the physical examination of recruits, paragraph 196; (7) report of station and duty, paragraph 134, A. R. 1464; (8) report of repairs to hospitals and hospital steward's quarters, paragraph 41; (9) report of issues and sales of medicines to civilians, paragraph 75.

(*c*) *Yearly.*—(1) Returns of medical property, paragraph 93; (2) estimates for repairs to hospitals and hospital steward's quarters, paragraph 41.

(*d*) *Occasional.*—(1) Report of epidemic diseases, paragraph 129; (2) report of record books, paragraph 137; (3) list of wounded, A. R. 1466; (4) report of deaths of officers, paragraph 131; (5) report of desertions, A. R. 123.

(*e*) In the absence of a medical officer, the physician who renders professional service will sign papers of a professional character, such as reports of sick and wounded, surgical reports, morning sick reports, etc.

129. On the appearance of the first recognized case of cholera, yellow fever, or other epidemic disease at or near a military post or station, the medical officer in charge will at once

report the fact to the chief surgeon and forward a duplicate of his report direct to the Surgeon General. Every medical officer in charge of cholera or yellow-fever patients will, in addition to the usual report of sick and wounded, render in duplicate, at the end of each month, a report (Form No. 27) containing a list of such patients, one of which he will forward to the chief surgeon and the other direct to the Surgeon General. At the close of the epidemic, or of his tour of service at the place, he will forward, with as little delay as practicable, a history of the epidemic, its origin or importation, its progress and decline, and the methods of treatment or prevention, with results; also results of autopsies.

130. Medical officers will notify local boards of health of any cases of yellow fever, cholera, smallpox, or other contagious diseases that may occur at their posts of duty.

131. The death of an officer, physician under contract, or hospital steward, will be immediately reported by the attending surgeon or nearest medical officer, to the chief surgeon and the Surgeon General. (See A. R. 81.)

132. It is not necessary to report in full every month in the sanitary report required by A. R. 1393 when no change in the conditions has taken place since last report. A general statement under each of the headings should be made, with a reference to previous reports containing more extended information on the subject. But important changes in the sanitary conditions occurring during the month should be fully described.

(*a*) If the subjects to be reported require more space than is provided by the blank form, use may be made of ordinary writing paper folded and transmitted as an inclosure.

(*b*) It is to be observed that although these sanitary reports are valuable as furnishing a record of conditions, changes, and recommendations, they are not always the best form of communication for suggestions requiring administrative action. Medical officers having important recommendations to make should invite attention to their subject in a special communication or report.

133. In time of war a great responsibility rests upon medical officers of the Army, for the result of a campaign may depend

upon the sanitary measures adopted or neglected by commanding generals of armies in the field. The medical officer is responsible for proper recommendations relating to the protection of the health of troops in camp or in garrison, and it is believed that, as a rule, medical officers of the United States Army are well informed as to the necessary measures of prophylaxis and the serious results which infallibly follow a neglect of those measures, especially when unacclimated troops are called upon for service in a tropical or semitropical country during the sickly season. In Cuba our armies will have to contend not only with malarial fevers and the usual camp diseases—typhoid fever, diarrhea, and dysentery—but they will be more or less exposed in localities where yellow fever is endemic and under conditions extremely favorable for the development of an epidemic among unacclimated troops. In view of this danger, the attention of medical officers, and of all others responsible for the health of our troops in the field, is invited to the following recommendations:

(*a*) When practicable, camps should be established on high and well-drained ground not previously occupied.

(*b*) Sinks should be dug before a camp is occupied, or as soon after as practicable. The surface of fecal matter should be covered with fresh earth or quicklime or ashes three times a day. New sinks should be dug and old ones filled when contents of old ones are two feet from surface of ground. Every man should be punished who fails to make use of the sinks.

(*c*) All kitchen refuse should be promptly buried and perfect sanitary police maintained.

(*d*) Troops should drink only boiled or filtered water and coffee or tea (hot or cold), except where spring water can be obtained which is pronounced to be wholesome by a medical officer.

(*e*) Every case of fever should receive prompt attention. If albumin is found in the urine of a patient with fever it should be considered suspicious (of yellow fever) and he should be placed in an isolated tent. The discharges of patients with fever should always be disinfected at once with a solution of carbolic acid (5%) or of chloride of lime (6 oz. to gallon of water), or with milk of lime, made from fresh quicklime. Whenever a case of yellow fever occurs in camp the troops

should be promptly moved to a fresh camping ground located a mile or more from infected camp.

(*f*) No doubt typhoid fever, camp diarrhea, and probably yellow fever are frequently communicated to soldiers in camp through the agency of flies, which swarm about fecal matter and filth of all kinds deposited upon the ground or in shallow pits, and directly convey infectious material, attached to their feet or contained in their excreta, to the food which is exposed while being prepared at the company kitchens or while being served in the mess tent. It is for this reason that a strict sanitary police is so important. Also because the water supply may be contaminated in the same way, or by surface drainage.

(*g*) If it can be avoided, marches should not be made in the hottest part of the day—from 10 a. m. to 5 p. m.

(*h*) When called upon for duty at night or early in the morning, a cup of hot coffee should be taken.

(*i*) It is unsafe to eat heartily or drink freely when greatly fatigued or overheated.

(*j*) Ripe fruit may be eaten in moderation, but green or overripe fruit will give rise to bowel complaints. Food should be thoroughly cooked and free from fermentation or putrefactive changes.

(*k*) In decidedly malarious localities from three to five grains of quinine may be taken in the early morning as a prophylactic, but the taking of quinine as a routine practice should only be recommended under exceptional circumstances.

(*l*) Light woolen underclothing should be worn, and when a soldier's clothing or bedding becomes damp from exposure to rain or heavy dews the first opportunity should be taken to dry it in the sun or by fires.

134. Medical officers will, on the last day of every month, report to the Surgeon General their stations and duties during the month, giving a brief résumé of the service performed by them. They will also immediately report any change in their station and duties, stating the authority therefor, with number, date, and source of order in each case. (See also A. R. 1464.)

INFORMATION SLIPS.

135. Information slips are intended for use by medical officers in cases where formal letters can be dispensed with, viz, personal reports of medical officers; changes in the status of Hospital Corps members and of hospital matrons; requests for authority for the reenlistment of acting hospital stewards and privates; acknowledgments of receipt of S. G. O. circulars; requests for and acknowledgments of receipt of blank forms, clinical thermometers, typewriter ribbons, and vaccine virus; requests for special expenditures of the hospital fund; acknowledgements of receipt of funds for construction and repair of hospitals and hospital stewards' quarters and monthly reports of progress of work; explanations concerning reports of sick and wounded and outline figure cards. They should not be used in any case requiring action by another bureau. Letter forms, such as "Sir: I have the honor," and "Very respectfully," will not be used. Indorsements should follow in sequence in the usual form. If neither remark nor action is required by the chief surgeon, his receiving stamp will take the place of an indorsement, to which may be added the words "contents noted," if deemed necessary. A memorandum will be entered on the stub, with the signature of the officer, to verify the record.

BLANK FORMS AND RECORDS.

See A. R. 1552. The forms and notes thereon have the force of Army Regulations.

136. The following blank forms are issued for the use of the Medical Department. Requisitions will always be made for one year's supply, and the required number of each blank will be stated:

Form No.	Title.
1	Invoice of funds.
2	Receipt for funds.
3	Account of funds received.
4	Voucher to abstract of disbursements, articles purchased, or services performed.
5	Voucher for property received by purchase.

Form No.	Title.	
6	Voucher pay roll of persons employed.	
7	Abstract of disbursements.	
8	Account current.	
9	Account of sales at public auction of medical supplies.	
10	Invoice of medical property sold at public auction.	
11	Abstract of medical property received by purchase.	Issued to medical supply depots only.
12	Abstract of medical property issued, sold, etc.	
13	Abstract of medical property received from officers.	
14	Return of medical property received, issued, and remaining on hand at medical supply depot.	
15	Requisition for medical supplies.	
16	Special requisition for medical supplies.	
17	Packer's list of medical supplies.	
18	Invoice of medical supplies, large and small.	
19	Receipt for medical supplies, large and small.	
20	Return of medical property, with additional leaves.	
21	Voucher to abstract of disbursements (bill for medical attendance).	
22	Voucher to abstract of disbursements (medicines furnished on prescription).	
23	Contract for medical supplies.	
24	Bond for fulfillment of contract.	
25	Report of sick and wounded, sheet 1 and sheet 2.	
26	Transfer book.	
27	List of patients suffering from epidemic diseases.	
28	Special diet table.	
29	Meteorological register. (Not now used. See paragraph 112.)	
30	Monthly report of physical examination of recruits.	
31	Return of medical officers.	
32	Return of the hospital corps.	
33	Record of variations of temperature.	
34	Statement of the ice fund.	
35	Statement of the hospital fund and return of durable property.	
36	Requisition for blank forms.	
37	Report of record books.	
38	Application for transfer to the hospital corps.	
39	Report of payments made on account of purchases and services.	
40	Diagram of areas of physical signs.	
41	Monthly sanitary report.	
42	List of wounded.	

Form No.	Title.
	RECORD BOOKS, ETC.
	Deaths and interments.
	Information-slip book.
	Information-slip book of deserters.
	Letter-press book.
	Medical history of post (with printed headings), No. 1.
	Medical history of post, No. 2
	Morning-report book.
	Order and letter book.
	Register of patients.
	Register of the hospital fund and return of durable property.
	Register of physical examination of recruits.
	Mailing tubes.

137. The report of record books pertaining to the Medical Department will be forwarded when an officer is relieved from duty or when a post is abandoned. The Descriptive and Deposit Book, the Clothing Book, and the Letter-press Book will be accounted for on this report. The Letter-press Book is not to be used as an "official record" of letters and indorsements sent. Orders, letters, letters received, and indorsements may be kept in separate books and substituted for the joint Order and Letter book and Letters received and Indorsement book. In all record books a statement explanatory of the contents will be pasted on the inside of the front cover. Care must be taken that signatures are made in these books wherever necessary. Entries in record books will be *continuous* until the books are filled; the date of commencement and of last entry to be noted on the report. In the column of *remarks* should be noted whether or not each book is in use, and if not, the reason should be stated. If all record books are not on hand, requisition for a complete supply will be promptly made.

THE MEDICAL HISTORY OF THE POST.

138. The Medical History of Post must be used exclusively for recording historical events in connection with the post, for the official indorsements on the report required by para-

graph 1393, A. R., and for the entry of data of interest reported on page 1 of the monthly report of sick and wounded, including births and marriages. (See paragraph 176.)

In cases of birth, there should be entered the date, the sex, and name of the child, and the name, rank, etc., of the father, maiden name of the mother, and whether this child is the first or second, etc., resulting from the marriage. In cases of marriage, the date and names should be recorded with the rank or occupation of the man and the age and birthplace of the woman. In cases of death, the date and cause, together with the name, sex, and age of the individual.

REGISTER OF PATIENTS.

139. Separate registers will be kept for regular and volunteer troops.

140. The term "sick" or "wounded," applied to an officer or soldier treated *in hospital*, means that he is so disabled as to be unfit for all military duty; applied to one treated *in quarters*, that he is partially disabled and unfit for all military duties, unless his fitness for certain duties is specifically stated by the medical officer. Under any of these conditions he is technically on the "sick report," and his name should be borne on the Register of Patients.

141. The entries on the Register of Patients will be made day by day as the cases are admitted, and will be continuous, *i. e.*, without break from day to day, month to month, or year to year. Ordinarily there will be but one entry for each case, although it may be prolonged for months. Exceptionally, cases which present many complications may have to be carried forward to current date to secure space for a satisfactory record; but in all such cases the two entries should be connected by cross references.

142. Officers or enlisted men who are excused from all or any part of their military duty, such as attendance on certain calls, drills, target practice, mounted duty, etc., because of physical disability, are to be borne upon the register until their cases are completed; officers and enlisted men excused from school duty merely, and capable of performing their strictly military duties, need not be so borne. A case prescribed for, but not excused from duty, will not ordinarily be

entered on the register; but when it is of such a character as to have a probable bearing on the subsequent medical history of the individual, or when from the exigencies of the service the officer or soldier continues to perform his duties, notwithstanding his manifest disability, it should be recorded on the register with a statement to that effect. When the status of an officer or soldier absent from his post on ordinary leave or furlough becomes changed to absence on account of sickness, his case should be entered on the register.

143. The cases of retired officers and enlisted men, and of civilians, including general prisoners, taken into hospital for treatment, should be entered on the register. When the status of a soldier while sick in hospital becomes changed to civilian, the case of the soldier should be closed and a new entry made for the civilian.

144. When a patient absent sick from his command is admitted to hospital for treatment, the surgeon in charge of the hospital should notify the surgeon on whose register the patient is borne, and request a formal transfer of the case. When the patient leaves the said hospital as cured, transferred, etc., the record of his case should be so completed; but if he leave the hospital uncured, or to resume a status of absent sick, the surgeon in charge of the hospital should send a transfer slip to the surgeon of the command to which the patient belongs, who should take the case up on his register.

145. A book of transfer slips is furnished by the Surgeon General to meet the necessities of moving commands, which passing near a post, may leave their sick and wounded for treatment. It should be used also when cases are sent from one post or hospital to another, by change of station of company, for the sake of better accommodations, for benefit of climate, or for observation by the chief surgeon. The original slip should contain the patient's name, military description, date of admission to sick report, name of disease or injury, and such details of the case as will probably be of value to the receiving officer. It will be signed by the medical officer who makes the transfer, and will be forwarded with the patient. On the reverse of the slip the receiving officer will note the admission of the patient into hospital; and after carefully recording the information thereon in the register, paragraphs

154, 155, he will forward the slip with the next report of sick and wounded to the Surgeon General. In transfers to the Government Hospital for the Insane a slip containing a copy of the certificate that accompanied the soldier should be sent to the Surgeon General. The duplicates of the transfer slips will be left in the book and will form a part of the retained records of the hospital or command from which the soldiers were sent.

DIRECTIONS FOR PREPARING THE REGISTER.

146. In Column I will be inscribed the patient's number. Every case of sickness, death, discharge, etc., entered on the register will have a number for convenience of reference, and these numbers will be consecutive, and will be carried forward indefinitely. In order that the medical history of a patient may be more readily traced, his last register number, if he has been previously on sick report at the post, should be entered immediately over his current number. In the exceptional instances to which reference is made in paragraph 141, no change is made in the register number of the patient, which, with the name of the patient, should be entered to secure identification, but no further repetition of the original entry is necessary, as the words "carried from page —" written after the name will suffice to connect the record.

147. In Column II the Christian name and surname should be entered in full; initial letters may be used for middle names.

148. In Columns III, IV, and V, calling for "Rank," "Company," and "Regiment or Corps," the usual abbreviations may be employed.

149. In Column VI the age at last birthday should be entered. This entry is understood to be made on the date of admission.

150. In Column VII the letter W., C., or I., meaning white, colored, or Indian, will be entered.

151. Column VIII provides space for the State or country of birth.

152. Column IX calls for the total number of years of service of the individual, whether continuous or not.

153. In Column X the day, month, and year of admission should be stated. Figures should not be used to designate the month.

154. The source of admission called for in Column XI is generally the command, but may be "from desertion," etc. When patients are received from other hospitals or commands the name of the hospital or command should be given in each case with the date of last entry on sick report when known. Information on transfer slips, paragraph 145, or on field registers, paragraph 161, when used for this purpose, accompanying such patients, should be carefully recorded.

155. In Column XII the cause or causes of admission should be stated; the name and location of the disease; cause, location, character, and severity of injury, with attendant circumstances, date of occurrence, and nature of missile, weapon, or other producing agent. It should be stated, also, whether the case is taken into the hospital or treated in quarters; and should a case in "quarters" be subsequently taken into "hospital," or *vice versa*, the date of the change should be given. When there is more than one cause, and the disability associated with any of them is cured before final disposition of the patient, the date of the said cure should be given. The diagnosis reported on transfer slips received with patients, or on field registers when used for this purpose, should also be recorded. In reporting data pertaining to this column, space may be utilized, if deemed advisable, by spreading the information across the face of the columns on the left, beginning in the proper space and continuing so that the statement can readily be followed.

156. In recording the causes of admission, medical officers will make use of such terms as will briefly and accurately describe the disease or injury, governing themselves so far as possible by the official nomenclature, paragraph 180. In this connection the following points should be held in view:

(*a*) Pathological lesions should be recorded rather than their symptoms.

(*b*) In all cases in which the cause of admission is a local manifestation of a general affection, the character and locality of the one and the nature of the other should be stated.

(*c*) Diseases due to venereal contagion, the abuse of stimulants or narcotics, or to immoral practices should be so recorded.

(*d*) Distinction should be made between the venereal ulcer known as chancroid and the hard chancre of primary syphilis.

(*e*) Distinction should also be made between inflammations of venereal and nonvenereal origin, as in cases of balanitis, orchitis, bubo, etc., specifying the nature of the venereal cause and the causation in the nonvenereal cases.

(*f*) Inflammations should be reported as acute or chronic.

(*g*) The term "heart disease" should not be recorded when the special affection can be determined.

(*h*) In pulmonary affections the lobe or lobes involved should be stated, as also whether the disease is confined to the right or left or extends to both lungs; the complications of pleurisy should be particularly noted.

(*i*) Deviations from the normal in cases of impairment of vision or hearing should be ascertained and noted.

(*j*) The exact location, variety, and cause of hernia should be given, and when strangulated the condition and the means employed for relief.

(*k*) Wounds should be designated as slight or severe; in gunshot wounds, the points of entrance and exit of missile and the parts implicated should be recorded.

(*l*) Fractures should be designated as simple, comminuted, compound, or complicated, the character of the complications being stated.

(*m*) When erysipelas, gangrene, pyemia, tetanus, etc., complicate cases of injury, the lesions associated with the complication should be carefully described.

(*n*) When an injury is accidental, homicidal, suicidal, or judicial, it should be stated, with particulars in each instance.

(*o*) In cases of old injury constituting a cause of admission, the condition of the injured part at the date of current admission should be stated. If there is no record of the original injury in the register, the date, place, cause, and attendant circumstances, with the authority for the statements, should be entered; but if the original case is already recorded, a note of its register number in Column XII or XIV will suffice to connect the history.

(*p*) Special notes should be made of cases of malingering or feigned diseases, and of the means employed for their detection.

(*q*) When no diagnosis can be reached, the fact should be stated, together with the conditions which prevent the recognition of the disease or injury.

157. In Column XIII the opinion of the medical officer, based on a full consideration of all the facts as to whether the disease or injury occurred in the line of duty should be explicitly stated as *yes* or *no*. In forming and recording this opinion medical officers will be guided by the following instructions:

(*a*) All diseases contracted or injuries received while an officer or soldier is in the military service of the United States may be assumed to have occurred in the line of duty, unless the surgeon knows, first, that the disease or injury existed before entering the service; second, that it was contracted while absent from duty on furlough or without permission; or, third, that it occurred in consequence of willful neglect or immoral conduct of the man himself.

(*b*) When a soldier is disabled while on pass, or in confinement, the question of line of duty must be determined by the circumstances attending the incurrence of the disability, but the fact of being on pass or in confinement should be stated.

(*c*) When a medical officer expresses the opinion that an injury occurring during athletic sports, properly indulged in, was received in the line of duty, the opinion is accepted by the Surgeon General as satisfactory and final.

(*d*) In all cases in which the opinion is expressed by *no*, the circumstances attending the incidence of the disability, and on which the negative opinion is based, should be stated in Column XII, or across the face of the columns on its left, if space can be economized in that way.

158. In Column XIV, surgical operations, unusual treatment, complications, intercurrent diseases, and change of diagnosis, with date of change, will be noted. If an intercurrent disease is in no way dependent on the primary affection the date of its occurrence should be given, and an opinion should be recorded as to its origination in the line of duty; but if the complicating disease coexisted on admission it should be recorded in Column XII as one of the causes of admission, and an appropriate entry regarding it should be made in Column XIII.

159. Column XV provides space for the record of the disposition made of the completed cases, and Column XVI for the date, day, month, and year of the final disposition. In Column XV should also be entered the date of departure and return in cases of leave of absence or furlough. When a patient leaves his station on furlough or leave of absence on account of sickness, his case remains incompleted on the register until his return, when he resumes his status of present sick; but if during his absence he is admitted for treatment to some other hospital or command, or the organization to which he belongs is assigned to duty at some other station, his case should be completed by formal transfer. On the other hand, if during his absence his status becomes changed to absent on ordinary leave or furlough, his case should be completed as returned to duty.

(*a*) When a patient is returned to duty the entry *duty* will suffice, the cure being assumed to be complete unless a statement to the contrary is entered.

(*b*) In cases of retirement or discharge by expiration of term, by order, sentence, or operation of law, the fact should be specified; and a statement should be made of the degree of disability due to the complaint for which the individual was under treatment at the time of his removal from service, unless it was unquestionably not received in the line of duty.

(*c*) In retirements or discharge on account of wounds or disease, the cause and the degree of disability should be recorded, and if the cause be some other disability than that for which the patient was admitted, it should be stated whether it originated in the line of duty; and in this instance, also, when the opinion expressed is *no*, the circumstances attending the incidence of the disability and on which the negative opinion is based, should be recorded. In all cases of discharge on certificate of disability the date of discharge as given in the letter of notification from the adjutant should be recorded.

(*d*) In the cases of those not upon sick report found incapacitated for active service, and of those retired or discharged for disability, the nature of the disability, whether it originated in the line of duty, and other facts of interest obtainable, together with the date of departure from post, will be entered.

(*e*) The causes of deaths, and whether they originated in the

INFECTIOUS DISEASES, GENERAL AND LOCAL—CONTINUED.

Dengue.
Mumps.
Whooping cough.
Diphtheria.
Typhoid fever.
Cholera.
Yellow fever.
Cerebrospinal meningitis.
Malarial fever, intermittent.
Malarial fever, remittent or continued.
Tuberculosis of the lungs.
Tuberculosis of other organs.
Carcinoma.*
Sarcoma.*
Trichinosis.
Syphilis.
Gonorrhea.
Gonorrheal epididymitis and orchitis.
Chancroid and results.
Other diseases of this class.

LOCAL INFECTIONS WHICH ARE ALSO ENTERED UNDER "STRUCTURAL AND FUNCTIONAL DISEASES OF ORGANS."

Scabies.
Dermatophyti.
Tonsillitis.
Pericarditis.
Endocarditis.
Phlebitis.
Bronchitis, acute.
Pneumonia, croupous.
Pleurisy, acute.
Dysentery, acute.
Peritonitis, acute.
Meningitis.
Appendicitis.
Pyelitis and Pyelonephritis.
Cystitis.
Lymphangeitis.
Adenitis, nonvenereal.
Abscess.
Furuncle.
Carbuncle.
Hospital gangrene.
Whitlow.

II.—DISEASES OF NUTRITION, GENERAL.

Anemia.
Leucocythemia.
Glycosuria.
Gout.
Scurvy.
Other diseases of this class.

III.—STRUCTURAL AND FUNCTIONAL DISEASES.

A. DISEASES OF THE NERVOUS SYSTEM.

Alcoholism, acute.
Alcoholism, chronic.
Delirium tremens.
Apoplexy.
Cerebral congestion.
Chorea.
Epilepsy.
Insanity.
Locomotor ataxia.
Meningitis.
Myelitis.
Narcotic poisoning, acute.
Narcotic poisoning, chronic, or drug habit.
Neuritis.
Neuralgia.
Neurasthenia.
Nostalgia.
Paralysis.
Other diseases of this class.

B. DISEASES OF THE DIGESTIVE SYSTEM.

Corrosive and irritant poisons, effects of.
Diseases of the salivary glands and ducts.
Diseases of the teeth, gums, and alveoli.
Diseases of the mouth and tongue.
Tonsillitis.
Pharyngitis.
Peritonitis, acute.
Dyspepsia.
Gastritis.
Gastric ulcer and hemorrhage.
Colic.
Constipation.
Tenia or other intestinal parasites.
Cholera morbus.
Diarrhea, acute.
Diarrhea, chronic.
Enteritis.
Appendicitis.
Dysentery, acute,
Dysentery, chronic.
Hemorrhage, intestinal.
Fistula in ano.
Hemorrhoids.
Biliary colic and calculi.
Jaundice, catarrhal.
Hepatitis.
Hepatic cirrhosis.
Other diseases of this class.

* Etiology not determined; probably due to parasitic infection.

III.—STRUCTURAL AND FUNCTIONAL DISEASES—Continued.

C. Diseases of the Circulatory System.

Angina pectoris.
Cardiac irritability.
Cardiac degeneration.
Pericarditis.
Endocarditis.
Valvular disease and results.
Thrombosis and embolism.
Aneurism.
Varicose veins.
Phlebitis.
Other diseases of this class.

D. Diseases of the Respiratory Organs.

Larynx, diseases of.
Coryza.
Bronchitis, acute.
Bronchitis, chronic.
Bronchitis, capillary.
Emphysema.
Asthma.
Pulmonary congestion.
Pulmonary hemorrhage.
Pneumonia, catarrhal.
Pneumonia, croupous.
Pleurisy.
Other diseases of this class.

E. Diseases of the Genito-urinary System.

Pyelitis and pyelonephritis.
Nephritis, acute parenchymatous.
Nephritis, chronic parenchymatous.
Renal cirrhosis.
Calculus, renal.
Calculus, vesical.
Cystitis.
Enuresis.
Retention of urine.
Hematuria.
Prostatitis.
Prostatic hypertrophy.
Urethral stricture.
Balanitis, nongonorrheal.
Paraphimosis.
Phimosis.
Varicocele.
Hematocele.
Hydrocele.
Other diseases of this class.

F. Diseases of the Lymphatic System and Ductless Glands.

Adenitis.
Lymphangeitis.
Splenic hypertrophy.
Other diseases of this class.

G. Diseases of the Muscles, Bones, and Joints.

Muscular contraction.
Muscular rheumatism and myalgia.
Whitlow.
Osteitis and results.
Periostitis.
Arthritis.
Arthritis, chronic rheumatic.
Bunion.
Synovitis.
Other diseases of this class.

H. Diseases of the Integument and Subcutaneous Connective Tissue.

Corns and warts.
Ingrowing nail.
Chilblain.
Abscess.
Furuncle.
Carbuncle.
Ulcer.
Hospital gangrene.
Dermatitis from poisonous plants.
Erythemata.
Psoriasis.
Prurigo and lichen.
Herpes.
Eczema and pemphigus.
Impetigo and acne.
Scabies.
Dermatophyti.
Other diseases of this class.

I. Diseases of Organs of Special Sense.

(a) Diseases of the eye.

Lids, diseases of.
Lachrymal apparatus, diseases of.
Conjunctivitis, acute.
Coujunctivitis, chronic.
Corneitis.
Sclerotitis.
Choroid, diseases of.
Iritis.
Retinitis.
Snow-blindness.
Asthenopia.
Cataract.
Glaucoma.
Amaurosis.
Night blindness.
Other diseases of the eye.

III.—STRUCTURAL AND FUNCTIONAL DISEASES—CONTINUED.

I. DISEASES OF ORGANS OF SPECIAL SENSE—Continued.

(*b*) *Diseases of the ear.*

Diseases of external ear.	Earache.
Diseases of the tympanum.	Deafness.
Diseases of middle and internal ear.	

(*c*) *Diseases of the nose.*

Nasal catarrh, chronic.	Nasal polypus.
Nasal hemorrhage.	

IV.—ACCIDENTS AND INJURIES.

A. GENERAL INJURIES.

Burns and scalds, general.	Hanging.
Crushing.	Insolation.
Drowning.	Lightning.
Exhaustion from fatigue or exposure.	Starvation, exclusive of disease.
Explosion.	Suffocation, exclusive of disease.
Freezing.	Venomous bites, stings, and wounds.

B. INJURIES TO SPECIAL PARTS.

Abrasions and blisters, mechanical.	Hernia, other.
Burns and scalds, local.	Orchitis, from injury.
Compression of the brain.	Strain, muscular.
Concussion of the brain.	Wounds, contused.
Concussion of the spine.	Wounds, incised.
Contusions and sprains.	Wounds, lacerated.
Dislocations.	Wounds, punctured.
Foreign bodies, presence of.	Wounds, gunshot.
Fracture, exclusive of gunshot.	Secondary results of local injury.
Frostbite.	Other local injuries.
Hernia, inguinal.	

V.—UNCLASSIFIED.

Malingering.	Suicide.
Under observation, not diagnosed, or unknown.	Self-maiming.
Homicide.	Judicial execution.

181. Medical officers in recording the causes of admission to sick report will make use of this nomenclature in all cases for which a specific title is provided. Experience has shown that it includes most of the causes of disability likely to occur in army practice. In recording cases for which a title is not specially provided, as, for instance, those which, in a consolidation of the statistics, would be tabulated under "Diseases of the mouth and tongue," "Diseases of the external ear," etc., or thrown among "Other diseases of this class," such terms will be used as will briefly and accurately describe the disease or injury, while conforming as far as possible to the nomenclature generally accepted by the profession. Medical officers will report in this way also when the cases are to be consolidated on the classified list under a generic term, as in certain of the diseases of the skin.

(*a*) The organ or part affected should be specified when the name of the morbid condition fails to indicate it, as in paralysis, aneurism, ulcer, herpes, etc., as also in inflammations, as adenitis, osteitis, arthritis, synovitis, etc., and in local injuries, as abrasions, burns, contusions, dislocations, etc.

(*b*) The surgical characteristics of wounds, fractures, hernia, etc., should be stated; and in cases of poisoning the name of the poison should be given.

EXAMINATION OF RECRUITS.

See A. R. 841, 842. Physical examination of.
A. R. 843, 846. Vaccination and its records.
A. R. 844. Recruits unfit for service or illegally enlisted.
A. R. 845. Examination prior to leaving rendezvous.
A. R. 847. Examination on arrival at post.
A. R. 848. Register of examinations and monthly reports of recruits examined.
A. R. 1458. Compensation to civilian physicians for examinations.

182. The minimum height of a recruit is at present fixed at five feet four inches for all branches of the service, although recruiting officers are allowed to exercise their discretion as to the enlistment of desirable recruits (such as band musicians, school-teachers, tailors, etc.), who may fall not more than one-fourth of an inch below the minimum standard of height; the *maximum* height for the cavalry service is five feet ten inches; that for infantry and artillery is governed by the maximum of weight, to which should be applied the rule for proportion in height (see par. 179).

183. The minimum weight for all recruits is one hundred and twenty-five pounds, except for the cavalry, in which enlistments may be made without regard to a minimum weight, provided the chest measurement and chest mobility are satisfactory. The *maximum* for infantry and artillery is one hundred and ninety pounds; for cavalry and light artillery, one hundred and sixty-five pounds.

184. The chest mobility, *i. e.*, the difference between the measurement at inspiration and expiration, should be *at least* two inches in men below five feet seven inches in height, and two and one-half inches in those above that height.

MODE OF EXAMINING A RECRUIT.

185. In passing a recruit, the examining officer is to examine him stripped; to see that he has the free use of his limbs; that his chest is ample; that his hearing, vision, and speech are perfect; that he has no tumors or ulcerated or extensively cicatrixed legs; no rupture or chronic cutaneous affection; that he has not received any contusion or wound of the head that may impair his faculties; that he is not a drunkard; is not subject to convulsions, and has no infectious or other disorder that may unfit him for military service. The recruit must be effective, able-bodied, sober, free from disease, and of good character and habits.

(*a*) The room in which the examination is conducted should be well lighted and large enough for the men to exercise in walking, running, and jumping, as every organ directly concerned in locomotion should be subjected to inspection. Only those persons who are absolutely required should be present at the examination.

(*b*) The person of the recruit should be washed with soap and water before he is presented for inspection. It is not, however, believed to be good policy to enlist men who, though able-bodied and intelligent, appear at recruiting stations in ragged or filthy dress, as the chances are such men are tramps and vagabonds and will not make good soldiers. Men who, though attired in clean and respectable clothing, are found to be filthy in their persons, should be promptly rejected for like reason.

186. Thoroughness in the preliminary examination is assured by a methodical inquiry into the family and personal history of the applicant, whose replies should be recorded at the time. For this purpose a printed form is furnished by the Adjutant General (form for the physical examination of a recruit). The form also serves as evidence, should the recruit allege unfitness from a defect that is feigned, or be subsequently found unfitted for duty on account of one which has been concealed.

(*a*) The questions prescribed in this form are intended simply as the guide to a careful and searching examination into the physical history of the applicant for enlistment. If his replies suggest the existence of any infirmity or defect,

special inquiry should be made concerning it, in order that the most complete information may be elicited. The questions, and any others necessary to develop his fitness for the duties of a soldier, should be asked and the man's replies recorded, by the recuiting officer, before he is stripped, after which the examination is proceeded with.

187. In the absence of a commissioned medical officer or contract surgeon, recruiting officers are authorized to employ a civilian physician to make the examination of recruits preceding enlistment required by Army Regulations, at the following rates of compensation:

(*a*) For the examination of a single recruit, one dollar; of two recruits on the same day, one dollar and fifty cents; of three on the same day, two dollars; of four on the same day, two dollars and fifty cents, and forty cents for each recruit over four examined on any one day.

(*b*) At recruiting stations where a large number of recruits are to be examined, or when a recruiting officer goes from place to place for the purpose of securing recruits, application will be made to the Surgeon General for authority to employ a physician by the month under contract.

(*c*) When a recruiting officer who has employed a contract surgeon under proper authority is ordered from place to place to make enlistments, he will give the contract surgeon proper written orders in advance to accompany him for the purpose of examining recruits, naming the places to be visited, and stating in the order that the travel enjoined is necessary for the public service.

188. In the absence of a medical examiner the recruiting officer will make and record the physical examination. In this case the form will remain with or follow the recruit until he has undergone examination by a physician, who will note the same upon the front fold. It will then be forwarded without delay to the Surgeon General, except as provided in paragraphs 844 and 847, A. R.

(*a*) In every case where the examination form does not have to follow the recruit, it should be sent with the outline figure card, paragraph 199, direct to the Surgeon General. If the examination form has to be sent elsewhere for completion by a medical officer, the outline figure card is not to be delayed,

but should be forwarded at once to the Surgeon General with a memorandum slip stating when and where the examination form has been sent.

189. Each peculiarity or deviation from the normal standard is to be noted on the form for the physical examination of a recruit.

(*a*) If a careful inspection is made and a defect is noted, which is not considered by the officer making the examination to be disqualifying, he is relieved from responsibility; but if he passes a recruit who has a serious defect, which is discernable by an ordinary layman, and enlists the man without noting the defect upon the examination form and the enlistment paper, it evidences neglect in the examination.

(*b*) There may sometimes be specially desirable applicants whose examination will disclose some defect not of a serious nature, which in the opinion of the recruiting officer and that of the examiner of recruits will not impair the efficiency of the men as soldiers. Such cases may be reported to the Adjutant General for decision, with a statement of the nature and extent of the defect and with appropriate recommendation.

190. Before recruits leave the station for the rendezvous or post they should be carefully reexamined and a statement to that effect made on the form, with a note descriptive of any defect which may have been discovered or contracted since the enlistment.

191. A completed examination form is required for file in the office of the Surgeon General in the case of every soldier who completes enlistment or reenlistment by taking the oath (including scouts and Indians). In the case of applicants who do not take the oath it may be destroyed after it has served its purpose in the conduct of the examination.

192. As Indian scouts are now enlisted for three years they will undergo the same physical examination as other enlisted men. The examination form will be used for this purpose, and, when filled up and completed, will be forwarded to the Surgeon General.

193. The following table is given for convenience of reference:

Table of Physical Proportions for Height, Weight, and Chest Measurement.

Height.		Weight.	CHEST MEASUREMENT.	
			At expiration.	Mobility.
Feet.	Inches.	Pounds.	Inches.	Inches.
5 4/12	64	128	32	2
5 5/12	65	130	32	2
5 6/12	66	132	32½	2
5 7/12	67	134	33	2
5 8/12	68	141	33¼	2½
5 9/12	69	148	33½	2½
5 10/12	70	155	34	2½
5 11/12	71	162	34¼	2½
6	72	169	34¾	3
6 1/12	73	176	35¼	3

(*a*) It is not necessary that the applicant should conform exactly to the figures indicated in the above table. A variation not exceeding ten pounds in weight or two inches in chest measurement (at expiration) below the standard given in the table is admissible when the applicant for enlistment is active, has firm muscles, and is evidently vigorous and healthy. The table is given to show what is regarded as a fair standard of physical proportions and not as an absolute guide to be followed in deciding upon the acceptance of recruits.

194. All accepted recruits not already protected will be vaccinated before leaving a recruiting station for a rendezvous, regiment, or post. This will apply also to recruits enlisted at military posts or camps. Vaccine virus is supplied by the Surgeon General of the Army. The compensation for vaccination of a recurit by a civilian physician not in the Government service is fifty cents.

REENLISTMENTS.

195. When authorized by the War Department under A. R. 838, clause 5, and A. R. 839, recruiting officers may reenlist discharged soldiers who present themselves within the pre-

scribed limit of time, notwithstanding they may have some physical disqualification which would cause their rejection as recruits: *Provided,* they have no serious defect which would probably prevent the discharge of their duties as soldiers. In all such cases the defects and the fact that they existed prior to reenlistment will be noted on the soldier's reenlistment papers and examination form.

NOTE.—In modifying the requirements for reenlistment, it is the intention of the War Department to provide for the continuance in service of such faithful soldiers as have incurred disabilities during prior enlistments which probably will not unfit them for duty in the future; as, for example, hernia, which is kept in place by wearing a truss; piles; varicose veins; certain defects of vision, as near or far sight; the loss of certain fingers or toes; mutilations by gunshot or other wounds, etc.

MONTHLY REPORTS OF EXAMINATIONS OF RECRUITS.

196. Monthly reports of examinations of recruits, From No. 30, S. G. O., required by paragraph 848, A. R., to be sent to the Surgeon General of the Army, are not called for in the cases of volunteers, nor are entries of examinations of volunteer recruits to be included in the monthly reports of regulars.

(*a*) A separate report is to be rendered for each place at which examinations are made.

(*b*) Each report will give a complete record of every applicant for enlistment or reenlistment physically examined during the month. It should *not* include the cases of applicants rejected before being stripped; nor the secondary examinations made after recruits are sworn in.

(*c*) If no applicant is examined during the month, a letter or information slip stating that fact will be forwarded in lieu of the report.

(*d*) When there is a medical officer at the station the report will be rendered by him; otherwise by the recruiting officer.

(*e*) *Height* will be given in feet, inches, and quarter inches; *chest measurements* in inches and quarter inches. In the column "White or Colored," write "W." for white, and "C." for colored; for Indians write "I.," and state in *Remarks* the service for which enlisted. In the column "Married or Single," write "M." for married and "S." for single.

(*f*) Final action will be recorded in the column "Accepted, Rejected, or Declined," by the term "accepted" (abbreviated entry "A.") for applicants who take the oath of enlistment;

and "rejected" (abbreviated "R."), "declined" (abbreviated "D."), etc., as may be required in other cases. When an applicant is rejected, before taking the oath, whether by the recruiting officer or the examining surgeon, the cause of rejection will be stated in "Remarks."

(*g*) The report will be held at station until final action can be recorded for all recruits on probation at the end of the month, six days (the maximum period of probation) if necessary. When final action in any case is deferred for a longer period the report will be forwarded on the sixth day, noting under "Remarks" that the case is in abeyance; and the Surgeon General should be apprised by letter or information slip of the final action when reached.

(*h*) One line should, as a rule, suffice for each case, and but one case should be entered on a line. Additional sheets will be used as necessary (each to be headed), and fastened together at the top. The report will be briefed upon the last sheet, and its correctness attested by the signature of the officer who renders it.

EXAMINATION OF CADETS AND CADET CANDIDATES.

197. A deviation from the table of physical proportions may be made in the examination of candidates for admission to the United States Military Academy, and for members of the graduating class, whenever this is deemed necessary by the Medical Examining Board.

198. Medical officers will be guided by the following instructions in examining candidates for admission to the United States Military Academy:

(*a*) *Hearing* must be normal in both ears.

(*b*) *Vision*, as determined by the official test types, must not fall below $\frac{15}{20}$ in either eye, and not below $\frac{20}{20}$, unless it can be made normal by proper glasses.

(*c*) Color-blindness is not a cause for rejection, but must be noted upon the form for physical examination, and the applicant so informed.

(*d*) Accepted candidates, if between seventeen and eighteen years of age, should not fall below five feet three inches in height and one hundred pounds in weight; if between eighteen and nineteen years, five feet three and one-half inches in height

and one hundred and five pounds in weight; if over nineteen, five feet four inches in height and one hundred and ten pounds in weight.

(*e*) The weight and chest measurement at expiration should not fall materially below the following standard, which, however, is not to be considered as absolute, and should not be strictly adhered to in the case of active boys who are less than eighteen years of age:

	Pounds.	Chest measurement at expiration.
5 feet 4 inches	118	30 inches.
5 feet 5 inches	120	30½ inches.
5 feet 6 inches	122	31 inches.
5 feet 7 inches	124	31⅛ inches.
5 feet 8 inches	128	31¾ inches.
5 feet 9 inches	132	32 inches.
5 feet 10 inches	136	32¼ inches.
5 feet 11 inches	142	32½ inches.
6 feet	148	33 inches.

(*f*) Candidates will be carefully examined, while stripped, by the methods prescribed in the authorized manual for the examination of recruits, and will be rejected for any mental or physical defect which would constitute a cause of rejection in the case of a recruit, or for any apparent feebleness of constitution, or cachexia.

(*g*) The result of the physical examination in each case, whether accepted or rejected, will be recorded on the blank form furnished by the Adjutant General for this purpose and forwarded to the Surgeon General.

OUTLINE-FIGURE CARDS.

See A. R. 914. Cards to be made for general prisoners prior to release from confinement.

199. A record of the marks upon the person of the accepted recruit will be made upon an outline-figure card. The blanks will be furnished by the Adjutant General.

200. A card is required for every soldier of the Regular Army who completes enlistment by taking the oath, except scouts, whether enlisting for the first time or not, and whether for the line or one of the staff departments. The card should

not be forwarded until the recruit is sworn in, and should then immediately, upon completion, be sent direct the Surgeon General. No letter of transmittal is required.

(*a*) The outline-figure card and the form for the physical examination of a recruit required to be sent to the Surgeon General of the Army, in the case of every recruit enlisted for the Regular Army, are *not* called for in the case of volunteers.

201. The outline-figure card will be prepared and forwarded *for enlistments made at military posts*, by the medical officer or the civilian physician making the medical examination; *for enlistments made at other recruiting stations*, by the medical officer or the civilian physician, if there is one; otherwise, as follows: (1) *When the recruit is sent direct to regiment, rendezvous, or post*, by the medical officer who examines the recruit upon his arrival there; (2) *when, before joining the regiment, rendezvous, or post, the recruit is discharged, is allowed a furlough, or is assigned to duty at the recruiting station*, by the enlisting officer.

202. All indelible or permanent marks of whatsoever character upon the person of the recruit, whether peculiar in themselves or not, should be recorded on the cards, viz: Scars (including vaccination marks), moles, birthmarks and pigmentations, circumcisions, amputations or other losses of joints of fingers or toes, tattoo marks, the absence of teeth (designating those that are absent), and malformations or deviations from the normal standard of any part of the person. It is not, however, desired that the cards shall be encumbered with the record of trifling and valueless marks minute in size, when better marks are found in sufficient number.

203. A careful and systematic search of the body should be made, front and rear, on each side of the median line, separately, commencing at the scalp and ending at the foot. The marks found will be recorded and described as indicated in paragraph 204.

(*a*) Cards showing less than five marks in addition to vaccination scars, tattooings, loss of teeth, and deformities (which should likewise be noted), can not be relied upon in the effort to discover identity or to establish it in suspected cases. Experience shows that as many as ten or fifteen marks may usually be found.

(*b*) If no mark be found upon the recruit, the fact should be stated upon both the front and back of the card; likewise, if marks are found upon the front and none upon the rear or *vice versa*, the entry "no mark" should be made upon the appropriate side of the card.

(*c*) Outline-figure cards are to be made out in permanent *black* ink. Copying ink or indelible pencils should not be used

(*d*) *Name.*—Christian name in full, middle initial (if any), and surname is the order to be used. The name should be written very plainly, or preferably typewritten or printed in plain gothic letters.

(*e*) *Organization.*—The company and regiment to which the recruit is assigned should be stated, if known.

(*f*) *Age.*—The age at the time the card is prepared is the one to be given.

(*g*) *Height.*—As the height is relied upon as a base in comparing the card of recruits with the classified descriptions of former soldiers, and as the measurement may to a considerable degree be affected by efforts at deception on the part of the subject, great care in ascertaining it is enjoined.

(*h*) *Hair.*—The scale of hair colors may be given, as follows:

Flax color.	Dark brown.
Light brown.	Black.
Of red hair, as follows:	Of gray hair, as follows:
Brick red.	Dark gray.
Sandy red.	Light gray, approaching white.
Auburn (reddish brown).	Iron gray (mixed).

(*i*) *Eyes.*—The eyes should be compared by placing the subject with his face in good light. Slide the Standard Eye Chart up or down the left side of the face, close to the left eye. The nearest approach in similarity of color is the number to be given. If the right eye is distinctly different in color its number also should be given.

(*j*) *White or Colored.*—Write the word "white" or "colored" to indicate race, as the case requires. Do not indicate it by crossing out one of the words.

(*k*) *Date of last prior enlistment in Regular Army.*—Service in the volunteers is not to be given, nor, if the recruit has had prior service, is the date of his discharge wanted. If the

recruit has had no prior Regular Army service, write the word "none."

(*l*) *Station and Date.*—Write the name of the station at which the card is made out, and the date of its preparation.

204. Marks on the outline-figure card should be made at points corresponding to those occupied by the marks on the body of the recruit. This may readily be accomplished by drawing imaginary lines on the body of the recruit, like the dotted lines on the card, and placing the mark in its proper position on the card. As the dotted lines mark the boundaries of regions which are used in the systematic arrangement of the cards for purposes of identification, it is of importance that each mark on a card should be placed in its proper position.

(*a*) A pen picture is desired of all marks, showing their inclination and general shape. See front and back of sample figure card on pages 108 and 109.

(*b*) A straight line should be drawn from each mark to its description on the right or left of the figure. When avoidable, these lines should not cross each other.

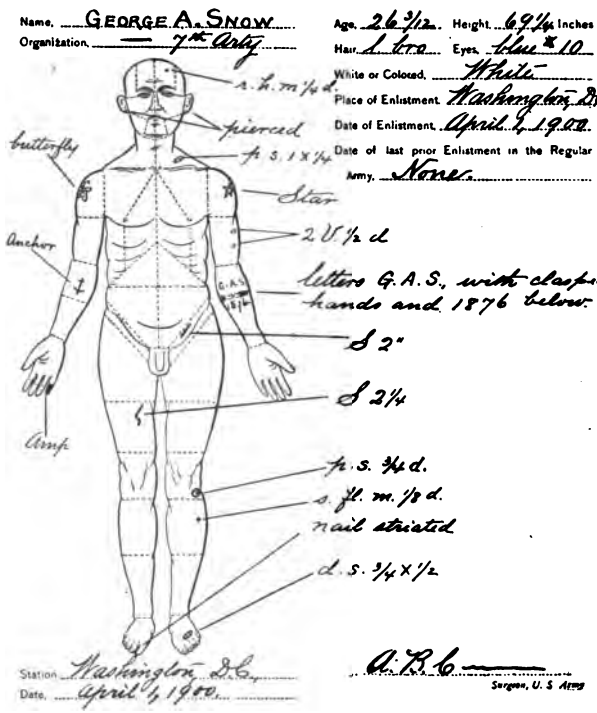
(*c*) When a description is common to a number of marks, it need not be repeated for each one, but the lines may converge to it, if they can do so without crossing others.

(*d*) The size of all marks is to be given in inches or fractional parts thereof, except in the case of pinhead moles.

(*e*) Tattoo marks should invariably be noted, and in their description words should be designated as such, and letters and numerals should be legibly recorded. Appropriate details of costume, posture, relationship to other devices, etc., should be given in the case of tattooed representations of men and women—*e. g., Irishman in knee breeches, swallow-tail coat and high hat, pipe in hatband, dancing, twirling shillalah in right hand. Boy astride of spread eagle, U. S. flag in uplifted left hand, words* "YOUNG AMERICA" *below.* In the case of devices composed of two or more figures, the component figures should be fully described.

(*f*) When the tattooed design is indecent or obscene, it is a cause for rejection, but the applicant should be given an opportunity to alter the design, in which event he may, if otherwise qualified, be accepted.

(*g*) Amputations and losses of parts of fingers and toes should be noted, specifying with care the particular member injured and how much of it is gone.

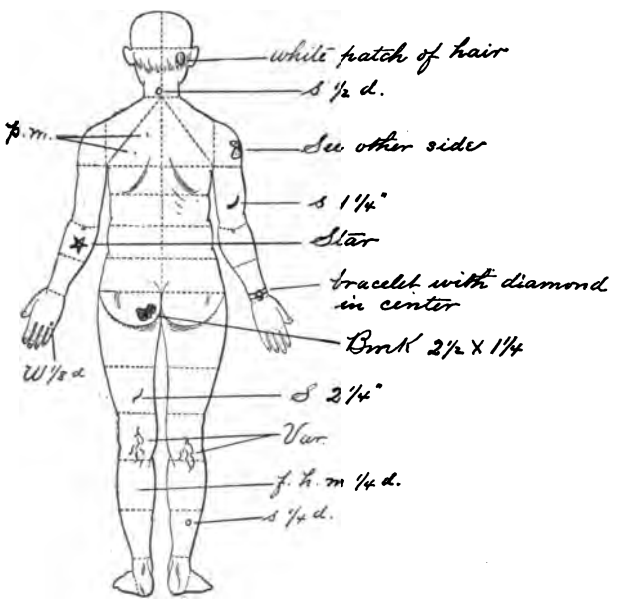


205. The following abbreviations are authorized, and will be understood in the sense indicated, viz:

Amp.=amputation.
Bmk.=birthmark.
d.=depressed, except when following a dimension; then it stands for diameter.
f.=flat.
fl.=fleshy.
h.=hairy.
m.=mole.
p.=pitted.
p. m.=pinhead mole.
r.=raised.
s.=scar or smooth.
v.=vaccination.
var.=varicose veins or varicocele.
w.=wart.

(*a*) All combinations of these abbreviations are admissible, *e.g.*, p. s. ½ d. =pitted scar one-half inch in diameter; r. h. m. ¼ d. =raised hairy mole, one-quarter inch in diameter; s. 1″= scar one inch long; f. p. s. 1 x ½=an oval, flat, pitted scar, one inch long and one-half inch wide.

(*b*) Abbreviations denoting shape are unnecessary, for the letter "d," following a dimension, shows that the mark is circular; two dimensions given indicate that the mark is oval



or oblong, and, when no letter follows the dimension it is understood that the scar or mark is linear.

(*c*) When a linear mark or scar is otherwise than straight, the length to be given is the shortest distance from one extremity to the other.

(*d*) The letters T. M. should not be used as abbreviations for "tattoo mark," as they are liable to be taken for tattooed letters on the person.

206. Outline-figure cards are required also for soldiers discharged dishonorably or without honor. This record will be made from an examination of the man immediately prior to discharge (unless the discharge is followed by a period of confinement at a military post); it will show the date and place of enlistment as in the case of recruit cards, and will cite the order for the discharge and the date upon which it is to take effect. When the dishonorable discharge is followed by a period of confinement at a military post, the card should be prepared about two weeks prior to the release of the prisoner; and in addition to the data above required, note should be made of the probable date of release. The card in these cases will immediately, upon completion, be forwarded to the Surgeon General. No letter of transmittal is required.

GENEVA CONVENTION.

207. The convention between the United States, Baden, Switzerland, Belgium, Denmark, Spain, France, Hesse, Italy, Netherlands, Portugal, Prussia, Wurtemburg, Sweden, Greece, Great Britain, Mecklenburg-Schwerin, Turkey, Bavaria, Austria, Russia, Persia, Roumania, Salvador, Montenegro, Servia, Bolivia, Chili, Argentine Republic, Peru, and Japan; with additional articles: For the amelioration of the wounded in armies in the field; concluded August 22, 1864; acceded to by the President March 1, 1882; accession concurred in by the Senate March 16, 1882; proclaimed as to the original convention, but with reserve as to the additional articles, July 26, 1882; commonly known as the Geneva Convention, is as follows:

ORIGINAL CONVENTION.

ARTICLE I. Ambulances and military hospitals shall be acknowledged to be neuter, and as such, shall be protected and respected by belligerents so long as any sick or wounded may be therein.

Such neutrality shall cease if the ambulances or hospitals should be held by a military force.

ART. II. Persons employed in hospitals and ambulances, comprising the staff for superintendence, medical service, administration, transport of wounded, as well as chaplains, shall

participate in the benefit of neutrality, whilst so employed, and so long as there remain any wounded to bring in or to succor.

ART. III. The persons designated in the preceding article may, even after occupation by the enemy, continue to fulfill their duties in the hospitals or ambulance which they serve, or may withdraw in order to rejoin the corps to which they belong.

Under such circumstances, when these persons shall cease from their functions, they shall be delivered by the occupying army to the outposts of the enemy.

ART. IV. As the equipment of military hospitals remains subject to the laws of war, persons attached to such hospitals can not, in withdrawing, carry away any articles but such as are their private property.

Under the same circumstances an ambulance shall, on the contrary, retain its equipment.

ART. V. Inhabitants of the country who may bring help to the wounded shall be respected, and shall remain free. The generals of the belligerent powers shall make it their care to inform the inhabitants of the appeal addressed to their humanity, and of the neutrality which will be the consequence of it.

Any wounded man entertained and taken care of in a house shall be considered as a protection thereto. Any inhabitant who shall have entertained wounded men in his house shall be exempted from the quartering of troops, as well as from a part of the contributions of war which may be imposed.

ART. VI. Wounded or sick soldiers shall be entertained and taken care of, to whatever nation they may belong.

Commanders in chief shall have the power to deliver immediately to the outposts of the enemy soldiers who have been wounded in an engagement, when circumstances permit this to be done, and with the consent of both parties.

Those who are recognized, after their wounds are healed, as incapable of serving, shall be sent back to their country.

The others may also be sent back on condition of not again bearing arms during the continuance of the war.

Evacuations, together with the persons under whose directions they take place, shall be protected by an absolute neutrality.

ART. VII. A distinctive and uniform flag shall be adopted for hospitals, ambulances, and evacuations. It must, on every occasion, be accompanied by the national flag. An arm badge (brassard) shall also be allowed for individuals neutralized, but the delivery thereof shall be left to military authority.

The flag and the arm badge shall bear a red cross on a white ground.

ART. VIII. The details of execution of the present convention shall be regulated by the commanders in chief of belligerent armies, according to the instructions of their respective governments, and in conformity with the general principles laid down in this convention.

ADDITIONAL ARTICLES.

ARTICLE I. The persons designated in Article II of the Convention shall, after the occupation by the enemy, continue to fulfill their duties, according to their wants, to the sick and wounded in the ambulance or the hospital which they serve. When they request to withdraw, the commander of the occupying troops shall fix the time of departure, which he shall only be allowed to delay for a short time in case of military necessity.

ART. II. Arrangements will have to be made by the belligerent powers to insure to the neutralized person, fallen into the hands of the army of the enemy, the entire enjoyment of his salary.

ART. III. Under the conditions provided for in Articles I and IV of the Convention, the name "ambulance" applies to field hospitals and other temporary establishments, which follow the troops on the field of battle to receive the sick and wounded.

ART. IV. In conformity with the spirit of Article V of the Convention, and to the reservations contained in the protocol of 1864, it is explained that for the appointment of the charges relative to the quartering of troops, and of the contributions of war, account only shall be taken in an equitable manner of the charitable zeal displayed by the inhabitants.

ART. V. In addition to Article VI of the Convention it is stipulated that, with the reservation of officers whose detention might be important to the fate of arms and within the limits fixed by the second paragraph of that article, the wounded fallen into the hands of the enemy shall be sent back to their country, after they are cured, or sooner if possible, on condition, nevertheless, of not again bearing arms during the continuance of the war.

[*Articles concerning the Marine.*]

ART. VI. The boats which, at their own risk and peril, during and after an engagement pick up the shipwrecked or wounded, or which having picked them up, convey them on board a neutral or hospital ship, shall enjoy, until the accomplishment of their mission, the character of neutrality, as far as the circumstances of the engagement and the position of the ships engaged will permit.

The appreciation of these circumstances is intrusted to the humanity of all the combatants. The wrecked and wounded thus picked up and saved must not serve again during the continuance of the war.

ART. VII. The religious, medical, and hospital staff of any captured vessel are declared neutral, and, on leaving the ship, may remove the articles and surgical instruments which are their private property.

ART. VIII. The staff designated in the preceding article must continue to fulfill their functions in the captured ship, assisting in the removal of the wounded made by the victorious party; they will then be at liberty to return to their country, in conformity with the second paragraph of the first additional article.

The stipulations of the second additional article are applicable to the pay and allowance of the staff.

ART. IX. The military hospital ships remain under martial law in all that concerns their stores; they become the property of the captor, but the latter must not divert them from their special appropriation during the continuance of the war.

ART. X. Any merchant ship, to whatever nation she may belong, charged exclusively with removal of sick and wounded, is protected by neutrality; but the mere fact, noted on the ship's

books, of the vessel having been visited by an enemy's cruiser, renders the sick and wounded incapable of serving during the continuance of the war. The cruiser shall even have the right of putting on board an officer in order to accompany the convoy, and thus verify the good faith of the operation.

If the merchant ship also carries a cargo, her neutrality will still protect it, provided that such cargo is not of a nature to be confiscated by the belligerents.

The belligerents retain the right to interdict neutralized vessels from all communication, and from any course which they may deem prejudicial to the secrecy of their operations. In urgent cases special conventions may be entered into between commanders in chief, in order to neutralize temporarily and in a special manner the vessels intended for the removal of the sick and wounded.

ART. XI. Wounded or sick sailors and soldiers, when embarked, to whatever nation they may belong, shall be protected and taken care of by their captors.

Their return to their own country is subject to the provisions of Article VI of the Convention, and of the additional Article V.

ART. XII. The distinctive flag to be used with the national flag, in order to indicate any vessel or boat which may claim the benefits of neutrality, in virtue of the principles of this Convention, is a white flag with a red cross. The belligerents may exercise in this respect any mode of verification which they may deem necessary.

Military hospital ships shall be distinguished by being painted white outside, with green strake.

ART. XIII. The hospital ships which are equipped at the expense of the aid societies, recognized by the governments signing this Convention, and which are furnished with a commission emanating from the sovereign, who shall have given express authority for their being fitted out, and with a certificate from the proper naval authority that they have been placed under his control during their fitting out and on their final departure, and that they were then appropriated solely to the purpose of their mission, shall be considered neutral, as well as the whole of their staff. They shall be recognized and protected by the belligerents.

They shall make themselves known by hoisting, together with their national flag, the white flag with a red cross. The distinctive mark of their staff, while performing their duties, shall be an armlet of the same colors. The outer painting of these hospital ships shall be white, with red strake.

These ships shall bear aid and assistance to the wounded and wrecked belligerents, without distinction of nationality.

They must take care not to interfere in any way with the movements of the combatants. During and after the battle they must do their duty at their own risk and peril.

The belligerents shall have the right of controlling and visiting them; they will be at liberty to refuse their assistance, to order them to depart, and to detain them if the exigencies of the case require such a step.

The wounded and wrecked picked up by these ships can not be reclaimed by either of the combatants, and they will be required not to serve during the continuance of the war.

ART. XIV. In naval wars any strong presumption that either belligerent takes advantage of the benefits of neutrality, with any other view than the interest of the sick and wounded, gives to the other belligerent, until proof to the contrary, the right of suspending the Convention, as regards such belligerent.

Should this presumption become a certainty, notice may be given to such belligerent that the Convention is suspended with regard to him during the whole continuance of the war.

ART. XV. The present act shall be drawn up in a single original copy, which shall be deposited in the archives of the Swiss Confederation.

The additional articles have been acceded to by the United States, and signed on behalf of Great Britain, Austria, Baden, Bavaria, Belgium, Denmark, France, Netherlands, North Germany, Sweden and Norway, Switzerland, Turkey, and Wurttemberg, but will not acquire full force and effect as an international treaty until the exchange of the ratification thereof between the several contracting states shall have been effected.

(*a*) All persons connected with the Medical Department of the Army in the field, or referred to in Article II of the Treaty, shall wear habitually during the war, on the left sleeve of the

coat, midway between the shoulder and elbow, a brassard or arm badge, consisting of a red cross on a white ground.

(*b*) All hospitals, ambulances, and field stations of the Medical Department will habitually display the Red Cross flag, accompanied by the National flag.

(*c*) Permits, in duplicate, for civilians to be present with the Army, in the service of the Medical Department, may be given by authority of a division commander; one copy of the permit will be retained by the person neutralized, and its duplicate should be forwarded promptly to the Chief Surgeon of the Army.

(*d*) Persons neutralized under this authority will report themselves at once to the chief surgeon of division for instructions.

(*e*) The wearing of the arm brassard by any person not officially neutralized is prohibited.

(*f*) Hospital ships are required to carry the Geneva Cross flag at the fore whenever the National flag is flown, and their neutrality must at all times be preserved. No guns, ammunition, or articles contraband of war, except coal or stores necessary for their movement, will be placed on board, nor should they be used as transports for carrying dispatches, officers or men not sick or disabled, other than those belonging to the Medical Department.

(*g*) The War Deparment recognizes for any appropriate cooperative purposes the American National Red Cross as the civil central American committee in correspondence with the International committee for the relief of the sick and wounded in war.

THE SUPPLY TABLE.

GENERAL SUPPLY.

208. The names of all expendable articles are printed in Roman type; those of nonexpendable articles are printed in italic.

More than fifty persons will be considered as an additional hundred in computing the population of a post; supplies may be required for accordingly.

MEDICINES.

Articles.	Allowances for posts having official population of—					
	100	200	400	600	800	1,000
Acacia (pulvis), in 500-gm. bottles—botts.	2	3	4	5	6	6
Acetanilidum, in 125-gm. bottles—botts.	1	1	2	2	3	3
Acidum aceticum, in 250-c. c. bottles—botts.	1	1	1	2	2	2
Acidum arsenosum, 1-mgm. tablets (125 in bottle), for field use only—botts.	1	1	2	2	3	3
Acidum boricum (pulvis), in 250-gm. bottles—botts.	1	1	2	2	3	3
Acidum boricum, 324-mgm. tablets (125 in bottle), for field use only—botts.	1	1	2	2	3	3
Acidum carbolicum, in 250-c. c. bottles—botts.	1	2	3	4	5	6
Acidum citricum, in 250-gm. bottles—botts.	1	1	2	2	3	3
Acidum hydrochloricum, in 250-c. c. g. s. bottles—botts.	1	1	2	2	3	3
Acidum hydrocyanicum dilutum, in 25-c. c. g. s. bottles—botts.	1	1	1	2	2	2
Acidum nitricum, in 250-c. c. g. s. bottles—botts.	1	1	2	2	3	3
Acidum phosphoricum dilutum, in 250-c. c. g. s. bottles—botts.	1	1	1	2	2	2
Acidum salicylicum, in 250-gm. bottles—botts.	1	1	2	2	4	4
Acidum sulphuricum, in 250-c. c. g. s. bottles—botts.	1	1	2	2	3	3
Acidum sulphuricum aromaticum, in 250-c. c. g. s. bottles—botts.	1	1	2	2	3	3
Acidum tannicum, in 25-gm. bottles—botts.	2	2	3	3	4	4
Acidum tartaricum, in 250-gm. bottles—botts.	2	2	4	4	6	6
Aconiti tinctura, in 50-c. c. bottles—botts.	2	2	3	3	4	4
Aconiti tinctura, 0.1-c. c. tablets (200 in bottle)—botts.	1	1	1	2	2	2
Æther, in 100-gm. tins—tins.	20	30	50	60	70	70
Ætheris spiritus compositus, in 250-c. c. bottles—botts.	1	1	2	2	3	3
Ætheris spiritus nitrosi, in 250-c. c. bottles—botts.	4	6	8	12	16	20
Albolene, in 500-c. c. bottles—botts.	1	2	3	4	5	6
Alcohol, in 1-liter bottles—botts.	10	18	32	40	50	60
Aloe (pulvis), in 25-gm. bottles—botts.	2	2	3	3	4	4
Aloini pilulæ comp. (200 in bottle)—botts.	1	1	2	2	3	3
Alumen, in 250-gm. bottles—botts.	2	3	4	5	6	6
Alumen, 324-mgm. tablets (150 in bottle), for field use only—botts.	1	1	2	2	3	3
Ammoniæ aqua, 10 p. c., in 500-c. c. g. s. bottles—botts.	3	5	8	10	12	16
Ammoniæ spiritus aromaticus, in 250-c. c. bottles—botts.	1	2	3	4	5	6
Ammonii bromidum, in 250-gm. bottles—botts.	1	1	1	2	2	2
Ammonii carbonas, in 250-gm. bottles—botts.	1	1	2	2	3	3
Ammonii chloridi trochisci (100 in bottle)—bottes.	2	3	4	6	8	10
Ammonii chloridum, in 250-gm. bottles—botts.	2	3	4	5	6	8
Amyl nitris (5-drop pearls), 12 in box—boxes.	2	2	3	3	4	4
Antimonii et potassii tartras, in 25-gm. bottles—botts.	1	1	1	1	1	1
Antipyrinum, in 125-gm. bottles—botts.	2	3	4	5	6	6
Antitoxin of diphtheria*—botts.						
Apomorphinæ hydrochloras, 6-mgm. hypodermic tablets—tubes.	1	1	1	2	2	2
Argenti nitras, in crystals, in 25-gm. bottles—botts.	1	1	2	2	3	3
Argenti nitras fusus, in 25-gm. bottles—botts.	1	1	1	2	2	2
Asafœtida, in 25-gm. bottles—botts.	1	1	1	1	1	1
Aspidii oleoresina, in 50-c. c. bottles—botts.	1	1	1	1	1	1
Atropinæ sulphas, 0.65-mgm. hypodermic tablets—tubes.	1	1	1	2	2	2
Atropinæ sulphas, 0.13-mgm. ophthalmic disks (50 in box)—boxes.	1	1	1	2	2	2

*To be purchased by the Surgeon General in amount sufficient for immediate use, if obtainable in vicinity. If not, telegraphic request to chief surgeon should be made. Special report of necessity to be made at once by mail.

MEDICINES—Continued.

Articles.	Allowances for posts having official population of—					
	100	200	400	600	800	1,000
Balsam of Peru, in 250-gm. tins—tins	1	1	2	2	3	3
Belladonnæ emplastrum, in 2-meter tins—tins	1	1	2	2	3	3
Belladonnæ foliorum extractum alcoholicum, in 25-gm. bottles—botts	1	1	2	2	3	3
Bismuthi subgallas, in 300-mgm. tablets (250 in bottle), for field use only—botts	1	1	2	3	4	5
Bismuthi subgallas, in 250-gm. bottles—botts	2	4	6	8	10	12
Bismuthi subnitras, in 500-gm. bottles—botts	2	2	4	4	6	6
Buchu extractum fluidum, in 500-c. c. bottles—botts	1	1	2	2	2	3
Caffeina citrata, in 25-gm. bottles—botts	2	2	2	3	3	3
Camphora, in 500-gm. bottles—botts	2	2	3	3	4	4
Cannabis indicæ tinctura, 0.06-c. c. tablets (100 in bottle)—botts	1	1	1	2	2	2
Cantharidis emplastrum, in 1-meter tins—tins	1	1	1	2	2	2
Cantharidis tinctura, in 100-c. c. bottles—botts	1	1	1	2	2	2
Capsici tinctura, in 100-c. c. bottles—botts	1	1	1	2	2	2
Capsicum, 32-mgm. tablets (150 in bottle), for field use only—botts	1	1	2	2	3	3
Cardamomi, tinctura comp., in 500-c. c. bottles—botts	1	1	2	2	3	4
Cera flava, in 250-gm. cakes—cakes	1	1	1	2	2	2
Ceratum resinæ, in 250-gm. jars—jars	1	1	1	2	2	2
Chloral, in 50-gm. g. s. bottles—botts	2	2	3	3	4	4
Chloroformum, in 250-c. c. bottles—botts	6	6	15	15	20	20
Chrysarobinum, in 25-gm. bottles—botts	1	1	2	2	2	2
Cinchonæ tinctura composita, in 500-c. c. bottles—botts	4	6	8	10	12	12
Cocainæ hydrochloras, in 5-gm. bottles—botts	2	2	4	4	6	6
Cocainæ hydrochloras, in 10-mgm. hypodermic tablets—tubes	1	1	2	2	3	3
Codeina, in 50-gm. bottles—botts	1	1	1	2	2	2
Codeina, 32-mgm. tablets (100 in bottle)—botts	1	1	1	2	2	2
Colchici seminis extractum fluidum, in 50-c. c. bottles—botts	2	2	3	3	4	4
Collodium, in 25-c. c. bottles—botts	2	4	6	8	10	10
Coniinæ hydrobromas, 0.65-mgm. hypodermic tablets—tubes	1	1	2	2	3	3
Copaiba, in 500-gm. bottles—botts	2	3	4	5	5	6
Copaibæ pilulæ comp. or tablets (100 in bottle)—botts	4	6	8	10	12	14
Creosotum, in 50-gm. g. s. bottles—botts	2	2	4	4	6	6
Creta præparata, in 250-gm. bottles—botts	1	1	2	2	3	3
Cupri arsenis, 0.325-mgm. tablets (200 in bottle)—botts	1	1	1	2	2	2
Cupri sulphas, in 50-gm. bottles—botts	1	1	1	1	1	1
Digitalinum, 1-mgm., hypodermic tablets—tubes	1	1	2	2	3	3
Digitalis tinctura, in 125-c. c. bottles—botts	2	2	3	3	4	4
Digitalis tinctura, 0.3-c. c. tablets, (200 in bottle)—botts	2	3	4	5	6	8
Emplastrum ferri, in boxes of 24—boxes	2	2	4	4	6	6
Ergotæ extractum fluidum, in 250-c. c. bottles—botts	1	2	3	4	5	6
Ergotinum, 130-mgm. tablets (200 in bottle)—botts	2	2	3	3	4	4
Eucalyptol, in 50-c. c. bottles—botts	2	2	3	3	4	4
Ferri chloridi tinctura, in 500-c. c. g. s. bottles—botts	1	2	3	4	5	6
Ferri et quininæ citras solubilis, in 100-gm. bottles—botts	1	2	3	4	5	6
Ferri iodidi syrupus, in 200-c. c. bottles—botts	1	1	2	2	3	3
Ferri pilulæ compositæ (200 in bottle)—botts	1	2	3	4	5	6
Ferri sulphas exsiccata, in 100-gm. bottles—botts	1	1	1	2	2	2

MEDICINES—Continued.

Articles.	Allowances for posts having official population of—					
	100	200	400	600	800	1,000
Ferrum redactum, in 25-gm. bottles—botts.	1	1	1	2	2	2
Gentianæ tinctura composita, in 500-c.c. bottles—botts.	2	3	4	5	6	7
Glycerinum, in 500-c. c. bottles—botts.	6	8	14	16	20	20
Glycerrhizæ extractus purum (pulvis), in 250-gm. bottles—botts.	2	3	4	6	8	10
Glycyrrhizæ mistura composita, tablets (400 in bottle—botts.	2	3	4	5	6	7
Glycyrrhizæ pulvis compositus, in 250-gm. bottles—botts.	1	1	2	2	3	3
Guaiacolis carbonas, in 25-gm. bottles—botts.	1	1	2	2	3	3
Hamamelidis extractum fluidum, in 250-c. c. bottles—botts.	2	2	3	3	4	4
Hydrargyri chloridum corrosivum, in 100-gm. bottles—botts.	1	1	1	1	1	1
Hydrargyri chloridum mite, in 100-gm. bottles—botts.	1	1	2	2	3	3
Hydrargyri chloridum mite cum sodii bicarb., tablets (200 in bottle)—botts.	2	3	4	5	6	8
Hydrargyri iodium flavum, 10-mgm. tablets (200 in bottle)—botts.	2	3	4	5	6	8
Hydrargyri massa, in 100-gm. jars—jars.	1	1	2	2	3	3
Hydrargyri massa, 324-mgm. tablets (125 in bottle) for field use only—botts.	1	1	2	2	3	3
Hydrargyri nitratis unguentum, in 50-gm. jars—jars.	1	1	1	1	1	1
Hydrargyri oleatum, 10 p. c., in 500-gm. w. m. bottles—botts.	1	1	1	2	2	2
Hydrargyri oxidum flavum, in 25-gm. bottles—botts.	1	1	1	1	1	1
Hydrargyri unguentum, in 500-gm. jars—jars.	1	1	1	2	2	2
Hydrargyrum cum creta, in 100-gm. bottles—botts.	1	1	2	2	3	3
Hydrastis extractum fluidum, in 250-c.c. bottles—botts.	1	1	1	2	2	2
Hydrogen peroxide, 10 volume strength, in 500-c. c. bottles	6	8	12	18	24	30
Hyoscinæ hydrobromas, 0.65-mgm. hypodermic tablets—tubes.	1	1	1	1	1	1
Hyoscyami extractum alcoholicum, in 25-gm. w. m. bottles—botts.	1	1	1	2	2	2
Hyoscyami pilulæ compositæ (200 in bottle)—botts.	1	1	2	2	3	3
Ichthyolum, in 25-gm. bottles—botts.	1	2	3	3	4	4
Iodoformum, in 100-gm. bottles—botts.	2	3	4	6	8	10
Iodum, in 50-gm. g. s. bottles—botts.	1	2	3	4	5	6
Ipecacuanha, 65-mgm. tablets (200 in bottle), for field use only—botts.	1	1	1	2	2	2
Ipecacuanha (pulvis), in 100-gm. bottles—botts.	1	1	1	2	2	2
Ipecacuanhæ et opii pulvis, in 250-gm. bottles—botts.	1	1	1	2	2	2
Ipecacuanhæ et opii pulvis, 324-mgm. tablets (200 in bottle)—botts.	1	1	2	2	3	3
Ipecacuanhæ extractum fluidum, in 250-c. c. bottles—botts.	1	1	2	2	3	3
Lanoline, in 500-gm. tins—tins.	1	1	2	3	4	5
Linimentum rubefaciens, tablets (50 in bottle), for field use only—botts.	2	2	3	3	4	4
Linum, in 2-kilo. tins—tins.	1	1	1	2	2	2
Linum (pulvis), in 4-kilo. tins—tins.	4	6	8	10	12	14
Lithii carbonas, in 25-gm. bottles—botts.	1	1	1	2	2	2
Lycopodium, in 50-gm. bottles—botts.	1	2	3	4	5	6
Magnesii carbonas, in 100-gm. papers—papers.	4	6	8	10	12	12
Magnesii sulphas, in 4-kilo. tins—tins.	2	3	5	7	8	10
Menthol, in 50-gm. bottles—botts.	1	1	2	2	3	3

MEDICINES—Continued.

Articles.	Allowances for posts having official population of—					
	100	200	400	600	800	1,000
Morphinæ sulphas, in 10-gm. bottles—bottles	2	4	6	8	10	12
Morphinæ sulphas, 8-mgm. hypodermic tablets—tubes	5	10	15	20	25	30
Morphinæ sulphas, 8-mgm. tablets (100 in bottle)—bottles	2	4	6	8	10	12
Myrrhæ tinctura, in 250-c. c. bottles—bottles	1	1	1	2	2	2
Nitroglycerinum, .65-mgm. tablets—bottles	1	1	2	2	2	2
Nitroglycerinum, .65-mgm. hypodermic tablets—tubes	1	1	2	2	3	3
Normal saline solution tablets, 500 in bottle—bottles	1	1	1	2	2	2
Nucis vomicæ tinctura, in 500-c. c. bottles—bottles	1	1	2	2	3	3
Nucis vomicæ extractum, in 25-gm. bottles—bottles	1	1	2	2	3	3
Oleum aurant. cort., in 50-c. c. bottles—bottles	1	1	2	2	3	3
Oleum caryophylli, in 25-c. c. bottles—bottles	1	1	1	1	1	1
Oleum gaultheriæ, in 100-c. c. bottles—bottles	1	1	2	2	3	3
Oleum gossypii seminis, in 1-liter bottles—bottles	12	24	36	48	60	72
Oleum menthæ piperitæ, in 100-c. c. bottles—bottles	1	1	2	2	3	3
Oleum morrhuæ, in 500-c. c. bottles—bottles	6	8	10	12	14	16
Oleum ricini, in 1-liter bottles—bottles	5	10	15	20	25	30
Oleum santali, in 100-c. c. bottles—bottles	1	1	2	2	3	3
Oleum terebinthinæ, in 1-liter bottles—bottles	2	4	6	8	10	12
Oleum theobromatis, in 250-gm. tins—tins	1	1	2	2	3	3
Oleum tiglii, in 25-c.c. bottles—bottles	1	1	1	1	1	1
Oleum tiglii, 0.006-c. c. tablets (100 in bottle), for field use only—bottles	1	1	1	2	2	2
Opii tinctura, in 500-c. c. bottles—bottles	1	2	3	4	5	6
Opii tinctura camphorata, in 500-c. c. bottles—bottles	4	8	12	16	20	24
Opii tinctura camphorata, 4-c. c. tablets (200 in bottle)—bottles	1	2	3	4	5	6
Opii tinctura deodorata, in 500-c. c. bottles—bottles	1	2	3	4	5	6
Opium (pulvis), in 100-gm. bottles—bottles	1	1	1	2	2	2
Oxalic acid, for surgical use, in 500-gm. bottles—bottles	1	1	2	2	3	3
Pepsinum, in 50-gm. bottles—bottles	2	3	4	6	8	10
Petrolatum spissum, 46.6 C., in 500-gm. tins—tins	4	6	8	12	16	20
Peptonizing tablets, 100 in bottle—bottles	1	1	1	2	2	2
Phenacetinum, in 125-gm. bottles—bottles	2	2	4	4	6	6
Physostigminæ sulphas, 1-mgm. hypodermic tablets—tubes	1	1	1	1	1	1
Physostigminæ sulphas, 0.0325-mgm. ophthalmic disks (50 in box)—boxes	1	1	1	1	2	2
Pilocarpinæ hydrochloras hypo. tablets, 8-mgm. (100 in bottle)—bottles	1	1	1	1	1	1
Pilulæ camphoræ et opii (or tablets), (200 in bottle)—bottles	2	3	4	5	6	7
Pilulæ carminativæ (200 in bottle)—bottles	2	3	4	5	6	7
Pilulæ catharticæ compositæ (or tablets), (200 in bottle)—bottles	3	4	6	8	10	12
Plumbi acetas, in 250-gm. bottles—bottles	1	1	2	2	3	3
Plumbi acetas, 130-mgm. tablets (100 in bottle), for field use only—bottles	1	1	1	2	2	2
Podophylli resina, in 25-gm. bottles—bottles	1	1	1	2	2	2
Podophylli resina, 16-mgm. tablets (100 in bottle), for field use only—bottles	1	1	1	2	2	2
Potassa, in 25-gm. bottles—bottles	1	1	1	2	2	2
Potassii acetas, in 500-gm. bottles—bottles	1	1	2	2	3	3
Potassii arsenitis liquor, in 250-c. c. bottles—bottles	1	1	2	2	3	3
Potassii bicarbonas, in 500-gm. bottles—bottles	1	1	2	2	3	3
Potassii bromidum, in 500-gm. bottles—bottles	1	2	3	4	5	6
Potassii chloras, in 500-gm. bottles—bottles	2	3	4	5	6	7

MEDICINES—Continued.

Articles.	Allowances for posts having official population of—					
	100	200	400	600	800	1,000
Potassii chloras, 324-mgm. tablets (200 in bottle), for field use only—bottles	2	3	4	5	6	7
Potassii et sodii tartras (pulvis), in 500-gm. bottles—bottles	4	6	10	12	14	16
Potassii iodidum, in 500-gm. bottles—bottles	1	2	3	4	5	6
Potassii iodidum, 324-mgm. tablets (200 in bottles), for field use only—bottles	1	1	1	2	2	2
Potassii permanganas, in 50-gm. bottles—bottles	3	3	6	6	9	9
Pruni virginianæ extractum fluidum, in 500-c. c. bottles—bottles	1	1	1	2	2	2
Quininæ hydrochlorosulphas, 65-mgm. hypo. tablets—tubes	4	6	8	10	12	15
Quininæ bisulphas, 25-gm. bottles—bottles	3	5	6	8	12	15
Quininæ sulphas, in 25-gm. bottles—bottles	10	15	20	25	36	50
Quininæ sulphas, 200-mgm. tablets (500 in bottle)—bottles	4	6	8	10	12	14
Rhamni purshianæ extractum fluidum, in 500-c. c. bottles—bottles	1	1	2	2	3	3
Rhei extractum fluidum, in 250-c. c. bottles—bottles	1	1	1	2	2	2
Rheum (pulvis), in 50-gm. bottles—bottles	1	1	2	2	3	3
Saccharum lactis (pulvis), in 100-gm. bottles—bottles	1	1	2	2	3	3
Salol, 324-mgm. tablets (125 in bottle)—bottles	2	3	4	5	6	6
Salophen, in 50-gm. bottles)—bottles	1	1	2	2	3	3
Santoninum, 32-mgm. tablets (50 in bottle)—bottles	1	1	1	2	2	2
Scillæ syrupus, in 500-c. c. bottles—bottles	4	8	12	16	20	24
Sinapis emplastrum, in 4-meter tins—tins	2	4	6	8	10	12
Sinapis nigra (pulvis), in 500-gm. tins—tins	2	3	4	5	6	7
Sodii bicarbonas, in 500-gm. bottles—bottles	4	6	8	10	12	14
Sodii bicarbonas, 324-mgm. tablets (200 in bottle), for field use only—bottles	1	1	1	2	2	2
Sodii bicarb. et menthæ pip. (tablets) 250 in bottle—bottles	1	2	3	4	5	6
Sodii boras (pulvis), in 500-gm. bottles—bottles	1	2	3	3	4	4
Sodii bromidum, in 250-gm. bottles—bottles	1	1	2	2	3	3
Sodii phosphas, in 100-gm. bottles—bottles	1	1	2	2	3	3
Sodii salicylas, in 500-gm. bottles—bottles	2	3	4	5	6	7
Sodii salicylas, 324-mgm. tablets (200 in bottle)—bottles	2	3	4	5	6	8
Sodium carbonate, for surgical use, in 1-kilo boxes—boxes	1	2	3	4	5	6
Strophanthi tinctura, in 100-c. c. bottles—bottles	1	1	1	2	2	2
Strychninæ sulphas, 1-mgm. hypo. tablets (500 in bottle)—bottles	2	2	3	3	4	4
Strychninæ sulphas, in 25-gm. bottles—bottles	1	1	1	1	1	1
Sulphonal, 324-mgm. tablets (200 in bottle)—bottles	2	2	4	4	6	6
Sulphur lotum, in 250-gm. bottles—bottles	1	1	1	2	2	2
Thymol, in 25-gm. bottles—bottles	1	1	1	2	2	2
Tolutanum balsamum, in 250-gm. tins—tins	1	1	2	2	3	3
Valerianæ extractum fluidum, in 250-c. c. bottles—bottles	1	1	1	2	2	2
Veratri viridis tinctura, in 100-c. c. bottles—bottles	1	1	1	1	1	1
Zinci oxidum, in 250-gm. bottles—bottles	1	1	1	2	2	2
Zinci sulphas, in 500-gm. bottles—bottles	1	1	1	2	2	2
Zinci sulphas, 324-mgm. tablets (100 in bottle), for field use only—bottles	1	1	1	2	2	2
Zingiberis extractum fluidum, in 250-c.c. bottles—bottles	2	2	3	4	5	6

209. ANTISEPTICS AND DISINFECTANTS.

Articles.	Allowances for posts having official population of—					
	100	200	400	600	800	1,000
Acid, carbolic, crude, in 1-kilo bottles—bottles	10	15	20	25	30	35
Antiseptic tablets (200 in bottle)—bottles	2	2	3	3	4	4
Formalin (40 per cent solution) in 1-liter bottles—bottles	6	10	15	20	24	24
Lime, chloride, in 500-gm. w. m. bottles—bottles	10	15	20	25	30	35
Quick lime*						
Mercury, corrosive chloride, in 500-gm. bottles—bottles	1	2	3	4	5	6
Sulphur, in roll—kilos	10	15	20	25	30	35
Tricresol, in 1-kilo bottles, or its equivalent in 1-lb. bottles—bottles	2	3	5	6	7	8

*To be purchased in quantities as needed when authorized by the chief surgeon.

210. HOSPITAL STORES.

Arrowroot, in 250-gm. packages—pkgs	8	12	16	20	24	28
Beef extract, liquid, Wyeth's or equivalent preparation, 100-c. c. bottles—bottles	10	15	20	25	30	35
Brandy, in 1-liter bottles—bottles	2	4	6	8	10	12
Chocolate, sweetened, in 250-gm. cakes—cakes	10	10	20	30	40	50
Condensed milk, unsweetened, in 500-gm. tins—tins	12	24	36	48	60	72
Gelatin, in 50-gm. packages—pkgs	5	5	8	10	12	15
Malted milk, in 1-lb. bottles—bottles	2	4	8	12	16	18
Sherry wine, in 1-liter bottles—bottles	2	4	6	8	10	12
Soap, toilet—kilos	2	3	4	5	6	7
Soap, common—kilos	5	8	10	12	14	16
Sugar, white, in 6-kilo tins—tins	1	2	3	4	5	6
Whisky, in 1-liter bottles—bottles	6	8	12	16	20	24

211. MICROSCOPE AND MICROSCOPICAL ACCESSORIES.

Agar-agar, in 500-gm. packages—pkgs	1	1	1	2	2	2
Alcohol, absolute, in 250-c. c. g. s. bottles—bottles	2	2	2	4	4	4
Aniline oil, in 125-c. c. bottles—bottles	1	1	1	2	2	2
Balsam bottle—no	1	1	1	1	1	1
Bismarck brown, in 4-gm. bottles—bottles	1	1	1	1	1	1
Canada balsam, in 30-c. c. bottles—bottles	1	1	1	2	2	2
Dropping bottle for oil of cedar—no	1	1	1	1	1	1
Filtering paper, Swedish, Munktel's, No. 1—quire	1	1	1	1	1	1
Forceps, cover-glass, Stewart's pattern—no	2	2	2	2	2	2
Forceps, small, straight, medium fine—no	1	1	1	1	1	1
Fuchsin, in 15-gm. bottles—bottles	1	1	1	1	1	1
Gelatin, in 60-gm. packages—pkgs	10	10	10	20	20	20
Gentian, violet, in 15-gm. bottles—bottles	1	1	1	1	1	1
Glass covers, 16 or 19 mm. square—gms	30	30	30	30	30	30
Glass slides, 25 by 75 mm—doz	4	4	4	8	8	8
Glass funnels, 25 c. c—no	2	2	2	2	2	2
Glass funnels, 500 c. c—no	2	2	2	2	2	2
Glass rods, 5 mm. thick—lbs	½	½	½	½	½	½
Litmus paper, best quality, blue and red, of each, sheets—sheets	2	2	2	2	2	2
Microscope, in case (see par. 236)—no	1	1	1	2	2	2

MICROSCOPE AND MICROSCOPICAL ACCESSORIES—Continued.

Articles.	Allowance for posts having official population of—					
	100	200	400	600	800	1,000
Methylene blue, in 15-gm. bottles—bottle	1	1	1	1	1	1
Oil of cedar, in 30-c. c. bottles—bottle	1	1	1	1	1	1
Peptone, in 250-gm. w. m. bottles—bottle	1	1	1	2	2	2
Section lifter, small—no.	1	1	1	1	1	1
Stopcocks, Mohr's, for rubber tubing—no.	2	2	2	2	2	2
Test tubes, 6 by ¾ in.—gross	2	2	2	2	2	2
Xylenum, in 250-c. c. bottles—bottle	1	1	1	2	2	2

The following are supplied only on special requisition by the medical officer:

Microtome, Laboratory, B. & L.—no.	1	Hæmatoxylin, Merck's—grams	10
Knife for microtome—no.	1	Eosin—grams	10
Belgian hone, 8 by 1½ in.—no.	1	Celloidin, Schering's—grams	50
Razor strop, Badger, Emerson's electric, 1¼ in. long—no.	1	Staining dishes, with covers—no.	6
Oiler for microtome—no.	1		

212. STATIONERY.

Articles.	Allowances for posts having official population of—					
	100	200	400	600	800	1,000
Baskets, letter—no.	2	2	2	2	2	2
Baskets, waste-paper—no.	2	2	2	2	2	2
Blank books, cap, 4-quire—no.	4	4	4	6	6	6
Blank books, 8vo, 4-quire—no.	2	2	3	3	4	4
Blotters, hand—no.	2	2	2	2	2	2
Cups, sponge—no.	2	2	2	2	2	2
Elastic bands, assorted—gross	2	2	2	3	3	4
Envelopes, official, large—no.	200	200	200	300	300	300
Envelopes, official, letter—no.	600	600	800	800	1000	1000
Envelopes, official, note—no.	100	100	150	150	200	200
Erasers, steel—no.	2	2	2	2	2	2
India rubber—pieces	2	2	3	3	4	4
Ink, writing, in 1-liter bottles—bottle	2	2	3	3	4	4
Ink, carmine, in 30-c. c. bottles—bottle	2	2	3	3	4	4
Inkstands—no.	3	3	3	4	4	4
Mucilage—bottle	2	3	4	5	6	7
Pads, prescription—no.	18	24	36	36	48	48
Pads, letter—no.	6	8	10	12	14	16
Paper, blotting—qrs.	1	1	1	2	2	2
Paper cutters—no.	2	2	2	2	2	2
Paper fasteners—boxes	1	1	1	1	1	1
Paperweights—no.	2	2	2	2	2	2
Paper, writing, legal cap—qrs.	6	6	8	8	10	10
Paper, writing, letter—qrs.	20	20	30	30	40	40
Paper, writing, letter, typewriter—qrs.	12	16	18	20	24	24
Paper, writing, note—qrs.	6	6	6	12	12	12
Pencils, lead—no.	18	18	24	24	36	36
Penholders—no.	8	8	10	10	12	12
Penracks—no.	3	3	3	3	3	3

STATIONERY—Continued.

Articles.	Allowances for posts having official population of—					
	100	200	400	600	800	1,000
Pens, steel* ——— no.	96	96	144	144	192	192
Ribbons, copying, for typewriter, as required† ———						
Ribbons, record, for typewriter, as required† ———						
Rulers ——— no.	2	2	2	2	2	2
Stamp, penalty, rubber ——— no.	1	1	1	1	1	1
Typewriter, with accessories ——— no.	1	1	1	1	1	1

* Falcon, stub, large fine and small fine will be issued as required.

†Supplied on the order of the chief surgeon. One only at a time should be asked for. The kind of ribbon and of machine should be stated in the request.

213. INSTRUMENTS, APPLIANCES, AND DRESSINGS.

Apparatus, compressed air ——— no.	1	1	1	1	1	1
*Apparatus, electric** ——— no.	1	1	1	1	1	1
Apparatus, restraint ——— no.	1	1	1	1	2	2
Apparatus, steam sterilizing ——— no.	1	1	1	1	1	1
Apparatus, X-ray (see paragraph 221) ———						
Atomizers, hand ——— no.	4	4	6	6	8	8
Bacteriological set, as per list ——— no.						
Bag, obstetrical ——— no.	1	1	1	1	1	1
Bandages, roller, assorted, in boxes of 6 dozen ——— boxes.	7	9	12	16	18	24
Bandages, rubber (Martin's), 4 meters by 63 mm ——— no.	1	1	1	2	2	2
Bandages, suspensory ——— no.	8	12	16	20	24	32
Bandage winder ——— no.	1	1	1	1	1	1
Bougies, flexible, as required ——— no.						
Boxes, fracture, folding ——— no.	1	1	1	2	2	2
Brush holders for larynx ——— no.	1	1	1	2	2	2
Case, aspirating ——— no.	1	1	1	1	1	1
Case, dental, small ——— no.	1	1	1	1	1	1
Case, emergency ——— no.	1	1	2	2	3	3
Case, ear, nose, and throat ——— no.	1	1	1	1	1	1
Case, eye ——— no.	1	1	1	1	1	1
Case, forceps, hæmostatic, 12 in set ——— no.	1	1	1	1	1	1
Case, genito-urinary (new model) ——— no.	1	1	1	1	1	1
Case, gynæcological ——— no.	1	1	1	1	1	1
Case, pocket ——— no.	1	1	2	2	2	3
Case, post-mortem ——— no.	1	1	1	1	1	1
Case, tooth-extracting ——— no.	1	1	1	1	1	1
Case, trial lenses ——— no.	———	———	1	1	1	1
Catheters, flexible, as required ——— no.						
Charts, anatomical, in case ——— set.	1	1	1	1	1	1
Chemical set, as required ——— set.						
Cotton, absorbent ——— kilos.	3	6	9	9	12	12
Cotton bats ——— kilos.	2	3	4	6	8	9
Curettes, as required ——— no.						
First-aid packets ——— no.	100	100	200	300	500	600
Forceps, needle ——— no.	1	1	1	1	1	1
Formaldehyde generator ——— no.	1	1	1	1	2	2
Gauze, plain ——— meters.	120	180	240	360	480	600
Hæmocytometer ——— no.	1	1	1	1	1	1
Hæmoglobinometer ——— no.	1	1	1	1	1	1
Inflator, Politzer's ——— no.	1	1	1	1	1	1

* Sulphuric acid, sulphate of copper, and bichromate of potash, in 500-gm. bottles, and metallic mercury, in 125-gm. bottles, will be issued as required for battery use.

INSTRUMENTS, APPLIANCES, AND DRESSINGS—Continued.

Articles.	Allowances for posts having official population of—					
	100	200	400	600	800	1,000
Inhaler and vaporizer—no.	1	1	1	1	1	1
Inhaler, ether—no.	1	1	1	1	1	1
Lavage tubes—no.	1	2	2	3	3	4
Ligatures, catgut, sterilized, 3 sizes, in packages, 1 meter each—pkgs.	10	12	18	20	24	30
Ligature silk—gms	15	15	30	30	45	45
Ligature, silkworm gut—coils.	2	2	4	4	6	6
Muslin, unbleached—meters.	20	20	40	40	60	60
Needles, surgical, assorted, as required—no.						
Needles, surgical (Hagedorn's), 20 in set—sets.	1	1	1	1	1	1
Ophthalmoscope—no.	1	1	1	1	1	1
Pins, safety, 3 sizes—dozen.	9	9	18	18	24	30
Plaster, adhesive, 30 cm. wide, in 5-meter rolls—meters.	20	25	30	40	50	60
Plaster, isinglass, in 1-meter rolls—meters.	2	2	4	4	6	6
Plaster of paris, in 2-kilo tins—kilos.	8	8	12	20	24	28
Pouches, Hospital Corps, as required—no.						
Pouches, orderly—no.	1	1	1	1	2	2
Probangs—no.	4	4	6	6	10	10
Pus basins—no.	2	2	2	4	4	4
Razors, aseptic—no.	2	2	2	2	2	2
Razor strop—no.	1	1	1	1	1	1
Rubber sheeting—meters.	8	8	12	12	16	20
Shaving brushes—no.	2	2	2	2	2	2
Silk, gray, for shades—meters.	¼	¼	½	½	1	1
Silk, oiled, in 5-meter rolls—meters.	10	10	20	20	30	30
Skeleton, in cabinet—no.				1	1	1
Speculum, rectal—no.	1	1	1	1	1	1
Splints, felt for—pieces.	4	6	8	8	10	10
Sponge holders, for throat—no.	1	1	1	2	2	2
Sponges, small, in strings of 50—no.	50	50	50	50	50	50
Sprinklers, iodoform, h. r.—no.	1	1	1	2	2	2
Stethoscope, double—no.	1	1	2	2	2	2
Syringes, hypodermic, aseptic—no.	2	2	2	4	4	4
Tents, laminaria, or tupelo—no.	6	6	12	12	18	18
*Thermo-cautery (Paquelin's)**—no.	1	1	1	1	1	1
Thermometers, clinical†—no.	4	4	5	6	6	8
Tongue depressors—no.	1	1	1	2	2	2
Tourniquet and bandage, rubber—no.	1	1	1	2	2	2
Tourniquet, field—no.	2	4	8	12	18	20
Trays, antiseptic—no.	1	1	1	1	2	2
Trusses, single—no.	2	3	4	6	6	8
Trusses, double—no.	1	1	1	2	2	2
Tubes, drainage, Nos. 1, 2, and 3, of each—meters.	1	1	1	1	1	1
Vision-test set—no.	1	1	1	1	1	1
Wire, suture, silver, in loops—loops.	1	1	1	2	2	2

* Benzine, of a specific gravity not greater than 0.724, in 1-liter bottles, will be issued as required for use with this cautery.

† Clinical thermometers will be issued from medical supply depots on request by information slip approved by the chief surgeon of the department, to whom such requests should be sent. Chief surgeons will see that there is no unnecessary expenditure and that the thermometers are not issued in unnecessary quantities.

214. FURNITURE, BEDDING, AND CLOTHING.

Articles.	Allowances for posts having official population of—					
	100	200	400	600	800	1,000
Basin, wash, delf, for office—no.	1	1	1	1	1	1
Basins, wash hand, agate ware—no.	6	6	6	10	10	10
Bath tubs, portable, on wheels—no.	1	1	2	2	3	3
Bed cradles—no.	1	1	2	2	3	3
Bedsteads, white enamel, with woven-wire mattresses—no.	12	12	18	18	30	30
Bedstead tips, rubber, for beds in wards only, as required—no.						
*Blanket cases, for field use only**—no.						
Blankets, gray, for field use only, as required—no.						
Blankets, white—no.	40	50	70	100	100	100
Bookcases—no.	1	1	1	2	2	2
Cabinet for blanks—no.	1	1	1	1	1	1
Chairs, arm—no.	10	12	15	20	25	30
Chairs, common—no.	10	12	15	20	25	30
Chairs, invalid, rolling—no.	1	1	1	2	2	2
Chairs, office, revolving—no.	1	1	1	2	2	2
Chairs, rocking—no.	3	3	4	5	6	6
Clocks†—no.	3	3	3	4	4	4
Close stools—no.	1	1	2	2	3	4
Commodes, earth closet—no.	1	1	2	2	3	3
Cuspidors—no.	6	6	10	10	15	15
Desks, field, as required—no.						
Desks, office—no.	1	1	1	2	2	2
Desks, office, cloth or rubber duck top for, as required—no.						
Dish, soap, with cover, for office—no.	1	1	1	1	1	1
Furniture, field, folding, as required—set.						
Lamps, hand—no.	2	2	2	3	3	3
Lamps, stand—no.	2	2	2	3	3	3
Linoleum, as required—meter.						
Looking-glasses—no.	4	4	6	6	8	8
Mats, door, manila—no.	4	4	6	6	8	8
Mats, door, woven wire—no.	3	3	4	4	5	8
Matting, rubber, as required—no.						
Mattress covers—no.	6	6	10	10	15	15
Mattresses, hair, in three equal parts—no.	10	12	18	24	30	40
Mosquito bars, as required—no.						
Oilcloth for table—meters.	6	6	6	12	12	12
Pajamas, suits—no.	20	20	40	40	50	60
Pillows, feather—no.	6	6	6	12	12	12
Pillows, hair—no.	15	24	30	40	50	60
Pillowcases, cotton—no.	40	40	60	80	100	130
Pitcher, delf, for office—no.	1	1	1	1	1	1
Pitcher, ice, silver-plated—no.	1	1	1	1	1	1
Quilts, white—no.	24	24	36	48	60	72
Refrigerators—no.	1	1	1	2	2	2
Safe, iron—no.	1	1	1	1	1	1
Screens, bed, folding, frames for, wrought-iron, white enamel—no.	2	2	2	4	4	4
Screens, door, wire, as required—no.						
Screens, window, wire, as required—no.						
Screens, wire netting for, as required—no.						
Spit cups, agate ware—no.	15	15	20	20	32	32
Sheets, cotton—no.	50	60	90	125	160	200

*Issued in the proportion of one case to ten gray blankets.

†Clocks will be issued on the basis of one for each ward, one for kitchen, and one for dispensary.

FURNITURE, BEDDING, AND CLOTHING—Continued.

Articles.	Allowances for posts having official population of—					
	100	200	400	600	800	1,000
Shirts, cotton—no.	20	20	40	40	50	60
Slippers—pairs.	12	12	18	18	24	36
Tablecloths, linen—meters.	15	15	20	25	30	35
Tables, bedside, iron, glass top, white enamel—no.	12	12	18	18	30	30
Tables, dining, extension—no.	1	1	1	1	2	2
Towels, hand—doz.	8	14	20	25	30	40
Towels, bath—doz.	2	3	4	5	6	7
Towels, dish—doz.	2	3	4	5	6	7
Window curtains, as required—no.	----	----	----	----	----	----
Window-curtain fixtures, as required—sets.	----	----	----	----	----	----

215. MISCELLANEOUS.

Alcolia (solidified alcohol) for field use only, in 1-kilo tins—kilos.	1	1	1	2	2	2
Alcolia, small burners for—no.	3	3	3	6	6	6
Bags, rubber, hot water—no.	1	2	2	4	4	4
Bags, rubber, ice, for head—no.	1	2	2	4	4	4
Bath bricks—no.	2	2	4	4	6	6
Bed pans, agate ware—no.	2	3	4	5	5	6
Bell, call—no.	1	1	1	1	1	1
Blowers, for insect powder—no.	1	1	1	1	2	2
Boiler, tin—no.	1	1	1	1	1	1
Boilers, double, for cooking—no.	1	1	1	1	2	2
Bowl, chopping—no.	1	1	1	1	1	1
Bowls, soup, delf—no.	18	24	36	48	60	72
Bowls, sugar, with lid—no.	2	2	4	4	6	6
Boxes, ointment, impervious—doz.	12	15	20	25	30	35
Boxes, pill—doz.	20	25	30	40	50	60
Boxes, powder—doz.	18	18	24	30	36	48
Brooms—no.	12	18	24	36	48	48
Brooms, whisk—no.	2	2	2	2	2	2
Brushes, flesh, rubber—no.	1	1	1	1	2	2
Brushes, nail, bristle—no.	6	6	12	12	18	18
Brushes, nail, holder for—no.	1	1	1	1	1	1
Brushes, scrubbing—no.	12	12	18	18	24	24
Brushes, stove-blacking—no.	3	3	3	4	4	4
Buckets, covered, 7-liter—no.	2	2	4	4	5	6
Buckets, fiber or wood—no.	4	6	8	10	12	15
Buckets, fire, galvanized iron—no.	12	12	18	18	24	24
*Burner, Bunsen's**—no.	1	1	1	1	1	1
Can openers—no.	4	4	4	4	4	4
Candlesticks, enameled—no.	4	4	4	6	6	6
Cans, milk, 9-liter—no.	1	1	2	2	2	3
Capsules, gelatin, 100 in box, 4 sizes—boxes.	20	24	32	40	48	60
Casters—no.	1	1	2	2	2	2
Chamois skins—no.	4	4	6	6	8	8
Chest, commode, as required—no.	----	----	----	----	----	----
Chest, food, as required—no.	----	----	----	----	----	----
Chest, medical, as required—no.	----	----	----	----	----	----
Chest, mess, as required—no.	----	----	----	----	----	----
Chest, surgical, as required—no.	----	----	----	----	----	----
Cleaver—no.	1	1	1	1	1	1

* Will not be issued to posts that have no gas supply.

MISCELLANEOUS—Continued.

Articles.	Allowances for posts having official population of—					
	100	200	400	600	800	1,000
Clippers, hair—no.	1	1	1	1	1	1
Clothes bags—no.	2	2	2	3	4	4
Clothesline, manila—meters.	60	60	60	90	90	90
Colanders—no.	1	1	1	2	2	2
Cork borers, set of 6—set.	1	1	1	1	1	1
Cork extractor—no.	1	1	1	1	1	1
Cork presser—no.	1	1	1	1	1	1
Corks, assorted, in bags of 24 dozen—doz.	72	72	120	120	168	168
Corks, large (No. 10)—doz.	2	2	3	3	4	4
Corkscrews—no.	2	2	2	3	3	3
Crutches—pairs.	4	4	6	6	8	8
Crutches, rubber tips for—no.	8	8	12	12	16	16
Cups—no.	18	24	36	48	60	72
Cups, feeding—no.	2	4	6	8	10	12
Cushions, rubber, small—no.	2	2	2	3	3	3
Cushions, rubber, with open center—no.	1	1	1	2	2	2
Cutting pliers, for fixed bandages—no.	1	1	1	1	1	1
Dippers—no.	3	3	4	4	5	5
Dish covers, wire netting, assorted—no.	6	6	9	9	12	12
Dishes, meat, assorted—no.	6	6	8	8	12	12
Dishes, vegetable, with covers—no.	4	4	6	8	10	12
Dispensing set—set.	1	1	1	1	1	1
Dispensing set, labels for, glass—set.	1	1	1	1	1	1
Drawer pulls, with labels, as required—no.						
Egg-beater—no.	1	1	1	1	1	1
Envelopes for tablets, 5 x 6-cm—doz.	30	40	45	50	60	70
Eye shades—no.	2	2	3	3	4	4
Fans—no.	12	12	18	18	24	24
Fire extinguishers (force pump)—no.	1	1	1	2	2	2
Flasks, 500-c. c—no.	2	2	3	3	4	4
Flasks, 1,000-c. c—no.	2	2	3	3	4	4
Forks, carving—no.	2	2	2	3	3	3
Forks, flesh—no.	1	1	1	2	2	2
Forks, table, common *—no.						
Forks, table, silver-plated—no.	24	36	48	56	72	72
Funnels, glass, 250-c. c., 500-c. c., and 1-liter—no.	3	3	3	6	6	6
Glue, liquid, in 250-c. c. cans—cans.	1	1	1	2	2	2
Grater, large—no.	1	1	1	1	1	1
Graters, small—no.	1	1	1	2	2	2
Gravy boats—no.	2	2	4	4	5	6
Gridiron—no.	1	1	2	2	2	2
Grindstone, complete, 25-cm. kitchen—no.	1	1	1	1	1	1
Hammer—no.	1	1				
Hand grenades—no.	12	18	24	36	48	48
Hatchets—no.	1	1				
Hone—no.	1	1	1	1	1	1
Hose, canvas, 2.5-cm., in 15-meter lengths—meters.	30	30	30	60	60	60
Hose, nozzles, plain and spray—no.	2	2	2	2	2	2
Hose, reel cart for—no.	1	1	1	1	1	1
Insect powder, in 500-gm. tins—tins.	2	2	4	4	6	6
Kettles, tea—no.	2	2	2	3	3	3
Knives, bread—no.	1	1	1	2	2	2
Knives, butcher's—no.	1	1	1	2	2	2
Knives, carving—no.	2	2	2	3	3	3
Knives, chopping—no.	1	1	1	1	1	1

* Knives, forks, and spoons, silver-plated, when so much worn as to be unfit for table use, will be dropped as "silver-plated" and taken up as "common."

MISCELLANEOUS—Continued.

Articles.	Allowances for posts having official population of—					
	100	200	400	600	800	1,000
Knives, table, common * ——no.						
Knives, table, silver-plated * ——no.	24	36	48	56	72	72
Labels for vials ——gross.	3	4	5	7	8	9
Ladder, step ——no.	1	1	1	1	1	1
Ladles ——no.	2	2	2	3	3	3
Lamp chimneys, as required† ——no.						
Lamp shades, as required ——no.						
Lamps, spirit, glass ——no.	2	2	2	4	4	4
Lamp wicks, as required† ——no.						
Lantern glasses, extra, red or white, as required ——no.						
Lantern wicks, as required ——no.						
Lanterns ——no.	2	2	2	3	3	3
Lawn mower ——no.	1	1	1	1	1	1
Litters ——no.	2	2	3	3	4	5
Litters, canvas for, as required ——pieces.						
Litters, straps for, as required ——no.						
Litter slings ——no.	3	4	5	6	8	10
Lye, concentrated, in 500-gm. tins ——tins.	6	8	10	12	14	16
Measures, 500-c. c. to ¼ liter ——set.	1	1	1	1	1	1
Measures, glass, graduated, 100-c. c ——no.	2	2	2	3	3	3
Measures, glass, graduated, 250-c. c ——no.	2	2	2	3	3	3
Measures, glass, graduated, 500-c. c ——no.	2	2	2	2	2	3
Meat cutter ——no.	1	1	1	1	1	1
Medicine droppers ——no.	12	12	24	24	36	48
Medicine glasses ——no.	4	4	6	8	10	12
Mills, coffee ——no.	1	1	1	2	2	2
Mop handles ——no.	4	6	8	8	10	10
Mortar and pest'e, glass, 10-cm ——no.	1	1	1	1	1	1
Mortar and pestle, Wedgwood, 8-cm ——no.	1	1	1	1	2	2
Mortar and pestle, Wedgwood, 20-cm ——no.	1	1	2	2	3	3
Mortar and pestle, Wedgwood, 30-cm ——no.	1	1	1	1	1	1
Mouse traps ——no.	2	2	2	2	2	2
Nail puller ——no.	1	1				
Napthalin, in 5-kilo. boxes ——kilos.	5	5	5	5	5	5
Needle, sailmaker's ——no.	1	1	1	1	1	1
Needle, upholsterer's ——no.	1	1	1	1	1	1
Needles, common, assorted ——papers.	3	3	3	6	6	6
Oil can, with pump, 22-liter ——no.	1	1	1	1	1	1
Pails, milk, with strainer ——no.	1	1	1	2	2	2
Pans, dish ——no.	2	2	2	3	3	3
Pans, dust ——no.	2	2	3	3	4	4
Pans, frying ——no.	1	1	2	2	3	3
Pans, milk ——no.	6	6	8	8	10	10
Pans, muffin ——no.	2	2	3	3	4	4
Pans, sauce ——no.	2	2	2	3	3	3
Paper, filtering, round, 25-cm ——pkgs.	3	3	4	4	5	6
Paper, litmus, blue and red, of each ——sheets.	2	2	3	3	4	4
Paper, tarred, in 30-meter rolls ——rolls.	1	1	1	1	1	1
Paper, toilet ——pkgs.	30	40	50	70	100	125
Paper, urinary test, assorted ——pkgs.	1	1	1	1	2	2
Paper, wrapping, blue and white, of each ——qrs.	2	4	6	8	10	12
Paper, wrapping, brown ——qrs.	1	2	3	4	5	6

*** Knives, forks, and spoons, silver-plated, when so much worn as to be unfit for table use, will be dropped as "silver-plated" and taken up as "common."**

† State kind of lamp for which chimneys and wicks are desired.

MISCELLANEOUS—Continued.

Articles.	Allowances for posts having official population of—					
	100	200	400	600	800	1,000
Pencils, hair, 1 dozen in vial—doz.	2	3	4	4	5	6
Percolators, glass—no.	1	1	1	2	2	2
Pickle dishes—no.	2	2	4	4	5	6
Pill machine—no.	1	1	1	1	1	1
Pill tile, 12 to 25 cm—no.	1	1	1	1	1	1
Pins, assorted—papers.	4	6	8	10	12	15
Pipettes, graduated, 5-c. c—no.	2	2	2	3	3	3
Pitchers, delf, 500-c. c—no.	2	4	4	6	8	10
Pitchers, delf, 1-liter—no.	2	4	4	6	6	8
Pitchers, sirup, glass—no.	2	2	3	3	4	4
Plates, dinner—no.	18	24	36	48	60	72
Potato masher—no.	1	1	1	1	1	1
Pots, chamber—no.	2	2	4	4	6	6
Pots, coffee, agate ware or tin—no.	2	2	2	3	3	3
Pots, tea, agate ware or tin—no.	2	2	2	3	3	3
Pots, watering—no.	1	1	1	1	1	1
Prescription file—no.	1	1	1	1	1	1
Racks for urinals and bedpans, as required—no.						
Retort stand—no.	1	1	1	1	1	1
Rolling pin—no.	1	1	1	1	1	1
Saltcellars, glass—no.	8	8	10	10	12	15
Sapolio—kilos.	3	4	5	7	10	12
Saucers—no.	18	24	36	48	60	72
Saw, butcher's—no.	1	1	1	1	1	1
Saw, hand—no.	1	1				
Scales and weights, apothecary's—no.	1	1	1	1	1	1
Scales and weights, balance, in glass case—no.	1	1	1	1	1	1
Scales and weights, grocer's—no.	1	1	1	1	1	1
Scales and weights, platform—no.	1	1	1	1	1	1
Scoops—no.	1	1	1	2	2	2
Screw-drivers, large and small—no.	2	2				
Settees for porch or hall—no.	1	1	2	2	3	3
Shears—no	2	2	2	2	2	2
Sickle—no.	1	1	1	1	1	1
Sieves, flour—no.	1	1	1	2	2	2
Skimmers—no	1	1	1	2	2	2
Spatulas, 15-cm—no.	1	1	2	2	2	2
Spatulas, 7-cm—no.	1	1	2	2	2	2
Sponges, bath, large—no.	4	4	4	6	8	8
Spoons, basting, agate ware or tinned iron—no.	2	2	2	2	3	3
Spoons, table, common‡—no.						
Spoons, table, silver plated—no.	18	24	36	48	56	72
Spoons, tea, common‡—no.						
Spoons, tea, silver plated—no.	18	24	36	48	56	72
Stamp, with outfit, for marking hospital clothing—no.	1	1	1	1	1	1
Steels—no.	1	1	1	1	2	2
Stove, coal oil, if required—no.	1	1	1	1	1	1
Stove blacking—papers.	6	10	10	20	20	25
Suppository mold—no.	1	1	1	1	1	1
Syringes, penis, glass, in case—no.	30	42	60	72	96	96
Syringes, rubber, self-injecting, bulb—no.	4	4	4	6	6	6
Syringes, rubber, self-injecting, fountain—no.	2	2	4	4	6	6
Tablet machine, with 200 and 324-mgm. dies—no.	1	1	1	1	1	1
Talcum (French chalk), 1-kilo. packages—kilos.	2	2	2	2	2	2

‡ Knives, forks, and spoons, silver-plated, when so much worn as to be unfit for table use, will be dropped as "silver-plated" and taken up as "common."

MISCELLANEOUS—Continued.

Articles.	Allowances for posts having official population of—					
	100	200	400	600	800	1,000
Tape, cotton—pieces	2	2	3	3	4	5
Tape measures, linen—no.	1	1	1	2	2	2
Test tubes—no.	12	12	18	18	24	24
Test tubes, stand for—no.	1	1	1	1	1	1
Thermometers—no.	2	2	2	3	3	3
Thread, cotton, assorted—spools	2	2	3	3	4	4
Thread, linen, unbleached—gms	30	30	30	60	60	60
Tools, chest of—no.	----	----	1	1	1	1
Trays, butler's—no.	2	2	4	4	6	8
Trays, bed, with legs—no.	2	2	4	6	8	8
Trimmer, lamp—no.	1	1	1	1	1	1
Trowel, garden—no.	1	1	1	1	1	1
Tubing, glass, assorted—kilos.	½	½	½	1	1	1
Tubing, rubber—meters	2	2	3	3	4	4
Tumblers, glass—no.	24	36	36	50	60	84
Twine, fine and coarse—kilos.	1	1	2	2	3	3
Twine boxes—no.	2	2	2	2	2	2
Urinals, glass, graduated—no.	4	4	6	6	8	8
Urinometers—no.	1	1	1	2	2	2
Vials, 50 in box, two 180-c. c., twelve 120-c. c., eighteen 60-c. c., twelve 30-c. c., six 15-c. c—boxes.	15	20	30	40	50	60
Vials, 4-c. c—no.	2	3	4	5	6	7
Washtubs—no.	1	1	1	1	2	2
Water coolers—no.	2	2	2	3	3	3

216. FURNITURE AND APPLIANCES FOR OPERATING ROOM.

One operating table.
**One case for instruments.*
Six scalpels, metal handles.
Three operating gowns for surgeons and assistants.
One table for instruments.
**One case for dressings, etc.*
One surgical cushion, Kelly's.
Eight tubes, catgut, assorted sizes, in Fowler's tubes.
One dozen spools, Halstead's, for silk ligature.
One coil silkworm gut.
One dozen brushes for cleansing.
One kilo green soap.

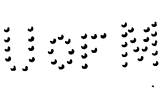
* NOTE.—Authority will be given for the purchase or manufacture of these cases at the post if they can be so obtained at a reasonable price.

Enameled Ware.

One instrument boiler.
Two wash basins.
Four basins for sponges, etc.
Two pitchers.
Two pails.
Two trays for instruments.

Glassware.

Two Petri's dishes for needles, etc.
Two small jars, covered, for ligatures, etc.
Four larger jars, for dressings, etc.
Six flasks for flushing solutions.
Six 4-liter bottles, g. s., for antiseptic solutions.



217. COMPOSITION OF TABLETS.

The words pills, tablets, and trochisci are used synonymously throughout the Supply Table. Compound tablets which are not official and are referred to by these names have the following composition:

Aloini Pilulæ Compositæ.

Aloinum mgms.	8
Podophylli resina mgms.	8
Belladonnæ fol. ext. alc mgms.	8
Strychnina mgms.	0.8
Oleoresina capsici mgms.	2.7

Ammonii Chloridi Trochisci.

Ammonii chloridum mgms.	130
Extractum glycyrrhizæ purum mgms.	518
Oleum anisi mgms.	3

Antiseptic.

Hydrargyri chloridum cor. mgms.	500
Ammonii chloridum mgms.	475

One tablet to one-half liter of water makes a 1-to-1000 solution.

Copaibæ Pilulæ Compositæ.

Copaiba mgms.	100
Resina guaiaci mgms.	24
Ferri citras mgms.	24
Oleoresina cubebæ mgms.	40

Ferri Pilulæ Compositæ.

Ferri pyrophosphas mgms.	65
Quininæ sulphas mgms.	32
Strychninæ sulphas mgm.	1

Hydrarg. Chl. Mite Cum Sodii Bicarb.

Hydrargyri chl. mite mgms.	32
Sodii bicarb mgms.	65

Hyoscyami Pilulæ Compositæ.

Extractum hyoscyami mgms.	65
Camphora mgms.	65
Oleoresina capsici mgms.	3
Morphinæ acetas mgms.	3

Linimentum Rubefaciens.

Camphora mgms.	
Capsicum mgms.	500
Ext. belladonnæ fol. alc mgms.	500

Dissolve one tablet in 30 c. c. of alcohol. 500

Mistura Glycyrrhizæ Compositæ.

Extractum glycyrrhizæ mgms.	6
Camphora mgms.	2.5
Acidum benzoicum mgms.	2.5
Opium mgms.	2.5
Antimonii et pot. tartras mgm.	1
Oleum anisi mgms.	2.5

Each tablet is the practical equivalent of 4 c. c. of brown mixture.

Normal Saline Solution.

Sodium chloride, c. p. gms.	2.0
Sodium carbonate, c. p., dried, gms.	.3

Three tablets to a liter make a .6 per cent solution of sodium chloride.

Phenacetinum Comp.

Phenacetinum mgms.	324
Caffeina citrata mgms.	65

Pilulæ Camphoræ et Opii.

Camphora mgms.	130
Opium mgms.	65

Pilulæ Carminativæ.

Morphinæ sulphas mgm.	0.8
Camphora mgms.	16
Extractum rhei mgms.	32
Sodii carbonas exsic mgms.	100
Oleoresina capsici mgms.	2.7
Oleum menthæ piperitæ mgms.	5

Sodii Bicarb. et Mentha pip.

Sodii bicarbonas mgms.	258
Ammonii carbonas mgms.	16
Oleum menthæ piperitæ mgms.	5

218. BOTTLES AND JARS CONTAINED IN DISPENSING SET.

Tincture Bottles.		**Salt-mouth Bottles.**	
1-liter	no. 11	*500-gm*	no. 9
500-c. c	no. 9	*250-gm*	no. 28
250-c. c	no. 21	*125-gm*	no. 22
125-c. c	no. 6	*60-gm*	no. 23
60-c. c	no. 18	**Salt-mouth Bottles, Blue.**	
Tincture Bottles, Blue.		*60-gm*	no. 4
125-c. c	no. 2	**Total.**	
Steeple-top Jars.		*Bottles*	no. 153
250-gm	no. 10	*Jars*	no. 10

219. COMPRESSED-AIR APPARATUS.

Air container, with gauge	no. 1	Davidson's sprays, in set, viz:	
Force pump	no. 1	*Atomizer tubes, h. r*	no. 3
Tubing, thick rubber, silk-covered, connecting container with cut-off	meters. 2.4	*Bottles, with h. r. caps*	no. 3
		Cut-off, metal	no. 1
Tubing, thick rubber, connecting container with force pump	meters. 1.2	*Stand for bottles*	no. 1
		Tube connector, h. r	no. 1
		Tube, wires for cleaning	no. 2

220. RESTRAINT APPARATUS.

(In wooden box, with handle and lock.)

Anklets	pair. 1	*Strap, bed,* as per circular	no. 1
Keys to lock buckles	no. 5	*Strap, waist*	no. 1
Muff, leather	no. 1	*Wristlets*	pair. 1

221. X-RAY APPARATUS.

Issued only to division, base, and general hospitals. The parts of this apparatus are as follows:

Edison Ruhmkorff coil, 6-inch spark, with adjustable condenser and vibrator	no. 1	*Adjustable stand for tube*	no. 1
		Battery; 10 Edison-Lelande cells, type "W," in metal-lined, polished-oak box	no. 1
Edison fluoroscope, 6 by 8 in	no. 1		
Edison X-ray focus tubes, medium size	no. 2	*Combination rheostat*	no. 1
		Battery cords	no. 2
Edison X-ray focus tubes, large size	no. 2	*Insulating wires*	no. 2
		Extra charges for battery	no. 2

222. CONTENTS OF ASPIRATING CASE.

(In morocco case.)

Needles, aspirating—no.	3	*Tube, metallic, with extra wires*—no.	1
Obturator, blunt, for cannula—no.	1	*Tubing attachments*—no.	4
Pump—no.	1	Tubing, rubber—pieces.	3
Tube, double current, metal, with rubber stopper—no.	1	*Trocar and cannula, with stopcock*—no.	1

223. CONTENTS OF DENTAL CASE.

(In small morocco case.)

Burnishers (Nos. 3, 29, 36)—no.	3	Gutta-percha—gms.	30
Chisels (Nos. 77, 135)—no.	2	*Handles for instruments*—no.	6
Explorer (No. 5)—no.	1	*Home*—no.	1
Excavators (Nos. 10, 14, 16, 21, 41, 82, 86, 141, 143, 145)—no.	10	*Mirror*—no.	1
		Paper, bibulous—sheets.	6
Files (2 each of Nos. 00, 0, 1)—no.	6	*Scaler (No. 3)*—no.	1
Forceps, college—no.	1	*Spatula (No. 1)*—no.	1

224. CONTENTS OF EMERGENCY CASE.

Tablets in 15-c. c. Bottles.		Hypodermic Tablets, in Tubes.	
Acidum tannicum—mgms.	324	Apomorphinæ hydrochloras †—mgms.	6
Aconiti tinctura—c. c.	0.1	Atropinæ sulphas †—mgms.	0.65
Aloini compositæ*—		Cocainæ hydrochloras—mgms.	10
Antiseptic*—		Digitalinum—mgms.	1
Bismuthi subnitras—mgms.	324	Morphinæ sulphas †—mgms.	8
Carminativæ*—		Nitroglycerinum—mgms.	0.65
Catharticæ compositæ—		Quininæ hydrochlorosulphas—mgms.	65
Chloral—mgms.	324	Strychninæ sulphas †—mgms.	1
Digitalis tinctura—c. c.	0.3	**Instruments.**	
Ergotinum—mgms.	130		
Glycyrrhizæ comp. mist. (Brown mixture)—mgms.	324	*Bistoury, curved and straight,* of each—no.	1
Hydrargyrum chl. mite cum sodii bicarb*—		*Forceps, hæmostatic*—no.	1
Ipecacuanha et opium—		Ligature, silk—gm.	1
Morphinæ sulphas—mgms.	8	Needles, surgical—no.	6
Opii tinctura camphorata—c. c.	0.4	Plaster, isinglass—roll.	1
Phenacetinum comp*—		*Scissors, straight*—no.	1
Quininæ sulphas—mgms.	200		
Sodii bromid—mgms.	324		
Sodii bicarb. et mentha pip*—			
Sulphonal—mgms.	324		

Syringe, hypodermic—no.	1
Thermometer, clinical—no.	1

*For formulæ see paragraph 217.
†In the hypodermic syringe case.

225. CONTENTS OF EYE CASE.

Cataract needle	1	*Probes, set Bowmans' lachrymal, set of 4*	1
Cystotome and curette, on same handle	1	*Scissors, enucleation, curved on flat, dull points*	1
Forceps, iris, curved	1	*Scissors, strabismus, curved on flat, dull points*	1
Forceps, fixation, spring catch	1	*Scissors, iris, curved on flat*	1
Hooks, strabismus	2	*Speculum, Noyes', eye*	1
Keratome, angular	1	*Spud, Dix's*	1
Knife, cataract (Graefe's)	1		
Knife, canaliculus, probe pointed	1		
Lid holder, rubber (Jaeger's)	1		
Paracentesis trocar (Desmarres's)	1		

226. CONTENTS OF INSTRUMENT CASE FOR EAR, NOSE, AND THROAT.

Cannula (Belocq's)	1	*Mastoid drill*	1
Catheter, Eustachian, silver	1	*Mirror, rhinoscopic*	1
Curette and hook	1	*Mirrors, laryngeal, 1 round, 1 oval, set at different angles*	2
Forceps, rectangular	1	*Myringotome, with angular handle*	1
Forceps, angular, polypus	1	*Nasal speculum (Bosworth's)*	1
Forceps, Buck's throat	1	*Specula, silver, ear (Toynbee's)*	3
Furuncle knife, with angular handle	1		
Head-mirror and band, three-inch	1		

227. CONTENTS OF HÆMOSTATIC FORCEPS CASE.

(In morocco case.)

Halstead's straight	1	*Tait's long grip*	1
Halstead's curved	1	*Tait's short grip*	1
Jones' angular	1	*Thornton's T*	1
Jones' straight	1	*Wood's (Péan's) large*	2
Little's fenestrated	1	*Wood's (Péan's) small*	2

228. CONTENTS OF GENITO-URINARY CASE.

Bistoury for meatus (Otis's)	1	*Gauge, steel (American and French*	1
Bougies a boûle (Otis's), metal, nickel-plated, Nos. 8 to 40, inclusive	33	*Guides (Otis's), whalebone*	2
Catheter, double current, silver	1	*Guides, whalebone (Gouley's)*	12
Catheter and staff, grooved and tunneled (Gouley's), with stylet	1	*Knife, beaked (Gouley's)*	1
Catheter, grooved and tunneled (Gouley's), with stylet	1	*Sounds (Otis's), short-beaked, steel, nickel-plated, Nos. 20 to 40, inclusive*	21
Catheter syringe, prostatic	1	*Sounds, tunneled, (Gouley's)*	3
Dilator (Thompson's), modified by Gouley	1	*Tenaculum (Gouley's)*	1
Director, silver (Gouley's)	1	*Urethrotome, Maisonneuve's, No. 8 (Otis's) gauge, with two blades, two filiform bougies and one extra tunneled tip for whalebone guide*	1
Endoscopes (Otis's h. r.), Nos. 22, 26, and 32	3	*Urethrotome, dilating (Otis's), straight, with two blades*	1
Forceps, urethal (Thompson's)	1		

229. CONTENTS OF OBSTETRICAL BAG.

Antiseptic tablets	botts. 1	Ligatures, silk	gm. 1
Axis traction obstetrical forceps (Tarnier's), Lusk's modification	no. 1	Ligatures, cat-gut	gm. 1
Blunt hook (Braun's)	no. 1	*Obstetrical bag as container*	no. 1
Cranioclast	no. 1	*Obstetrical forceps (Jewett's)*	no. 1
Chloroform, metallic case bottle,	botts. 1	*Placental forceps (Bozeman's)*	no. 1
Fluid extract of ergot	no. 1	*Perforator (Smellie's)*	no. 1
		Sterilized petrolatum	botts. 1
		Surgical needles	no. 12

230. CONTENTS OF GYNECOLOGICAL CASE.

Curettes, blunt (Thomas's), set of three	set. 1	*Scissors, lesser uterine (Emmet's), set of two*	set. 1
Curettes, sharp (Tiemann's), set of three	set. 1	*Sterilizer, nickel-plated, as container*	no. 1
Folding stand, nickel-plated	no. 1	*Twisting forceps (Emmet's)*	no. 1
Instrument tray, nickel-plated	no. 1	*Tenaculum, short curve (Emmet's)*	no. 1
Intra-uterine irrigating tube (Fritsch's)	no. 1	*Tenaculum, angular*	no. 1
Leather case, as container	no. 1	*Uterine dilator (Goodell's)*	no. 1
Needle (Crawford's)	no. 1	*Uterine packing forceps (Garrigues's)*	no. 1
Speculum, vaginal (Sims's)	no. 1	*Uterine dressing forceps (Tiemann's)*	no. 1
Speculum, vaginal (Graves's)	no. 1	*Uterine sound (Simpson's)*	no. 1
Scissors, double-curved (Emmet's)	no. 1	*Uterine speculum (Polk's)*	no. 1
Scissors, uterine, curved on flat, dull point	no. 1	*Vulsellum forceps (Cushing's)*	no. 1
Scissors, curved on flat, sharp point	no. 1	*Wire adjuster (Sims's)*	no. 1

231. CONTENTS OF POCKET CASE.

Bistoury, curved, probe-pointed	no. 1	Ligature, silk	gm. 1
Bistoury, straight	no. 1	*Needle, aneurism*	no. 1
Case, leather	no. 1	*Needle, exploring*	no. 1
Catheter, plated	no. 1	*Needles, surgeon's*	no. 12
Caustic holder	no. 1	*Pouch, leather*	no. 1
Director, grooved, with myrtle leaf	no. 1	*Probe, silver*	no. 1
Forceps, dissecting, mouse-tooth	no. 1	*Probe, with Nelaton's tip*	no. 1
Forceps, hæmostatic, and needle	no. 1	*Scalpel*	no. 1
Forceps, hæmostatic, short	no. 1	*Scissors, straight*	no. 1
Forceps, hæmostatic, long	no. 1	Silkworm gut	coil. 1
Horsehair	coil. 1	*Tenaculum*	no. 1

232. CONTENTS OF POST-MORTEM CASE.

(Handles of saw and of all knives are of ebony; those of costotome, hammer, and tenaculum are of steel. In mahogany box.)

Most of the post-mortem cases now in use are in accordance with the following list.

Blowpipe	no.	1	*Knife, amputating, small*	no.	1
Chain and hooks	no.	1	*Knife, cartilage*	no.	1
Chisel	no.	1	Needles (and thread)	no.	2
Costotome chisel	no.	1	*Saw*	no.	1
Enterotome	no.	1	*Scalpels, assorted*	no.	3
Forceps, dissecting	no.	1	*Scissors, straight*	no.	1
Hammer, steel	no.	1	*Tenaculum*	no.	1
Knife, amputating, large	no.	1			

233. CONTENTS OF TOOTH-EXTRACTING CASE.

(In leather-covered case, with lock and double handle.)

Elevators (Nos. 6 and 7)	no.	2	*Forceps, upper bicuspid and canine (No. 11)*	no.	1
Forceps, cowhorn (No. 23)	no.	1	*Forceps, upper front root (No. 1)*	no.	1
Forceps, lower bicuspid and canine (No. 21)	no.	1	*Forceps, upper incisor and canine (No. 13)*	no.	1
Forceps, lower incisor and bicuspid (No. 14)	no.	1	*Forceps, upper molar (No. 18)*	no.	1
Forceps, lower molar (No. 15)	no.	1	*Forceps, upper wisdom (No. 10)*	no.	1
Forceps, universal root (No. 7)	no.	1	*Lancet, gum*	no.	1

234. CONTENTS OF CASE OF TRIAL LENSES.

Bausch & Lomb.

(In mahogany case, with lock and two keys.)

Twenty pairs spherical convex lenses.
Twenty pairs spherical concave lenses, both from 2 to 160 English inches focus. (D. 20–0.25.)
Eleven cylindrical convex lenses.
Eleven cylindrical concave lenses, both from 8.88 to 160 English inches focus. (D. 4. 50–0.25.)
Six prisms, 2°, 3°, 4°, 5°, 8°, 12°.
Five disks, one white and one ground glass, one plain metal, one metal with hole in center, and one metal with stenopaic slit.
Four colored glasses—red, blue, green, and brown.
One graduated trial frame, No. 3, double cell.
One graduated trial frame, No. 2, double cell, adjustable.

235. INHALER AND VAPORIZER.

This consists of a nickel-plated stand, with boiler, spirit lamp, and detachable handle. There are two attachments, a long inhaler and a short deoderizer; both have a reservoir holding sponge saturated with the preparation to be vaporized.

236. THE "CONTINENTAL" MICROSCOPE.

Made by the Bausch & Lomb Optical Company. In one case (upright cherry wood, with handle, lock, and extra hook and post fastenings—no separate case of accessories accompanies this microscope), the contents of which are as follows:

Stand, Universal, BB	no.	1	*Objective,* $\frac{2}{3}$	no.	1
Eyepieces	no.	2	*Objective,* $\frac{1}{6}$	no.	1
Abbe condenser, with iris diaphragm	no.	1	*Objective,* $\frac{1}{12}$, *oil immersion*	no.	1

237. HYPODERMIC SYRINGE.

These syringes, as now issued, have as accessories, besides two needles and extra wires (the needles and wires are expendable), one tube of each of the following hypodermic tablets:

Apomorphinæ hydrochloras ____mgms.	6	Strychninæ sulphas ____mgm.	1
Atropinæ sulphas ____mgm.	0.65	Morphinæ sulphas ____mgms.	8

238. THERMO-CAUTERY, PAQUELIN'S.

(In morocco case.)

An improved pattern has recently been adopted. The contents are the same, except that the combustion chamber or lamp is omitted, the modified reservoir for hydrocarbon rendering it unnecessary.

Apparatus, double bulb, for supplying air ____no.	1	*Handle, cannulated, ebony* ____no.	1
Cautery button ____no.	1	*Reservoir for hydrocarbon, nickel-plated* ____no.	1
Cautery knife ____no.	1	Tube, lengthening ____no.	1
Combustion chamber (lamp), nickel-plated ____no.	1	Tube, rubber ____no.	1

239. VISION-TEST SET.

This set contains—

1. A set of three test cards for use at distances of 13, 16½, and 20 feet, respectively, bearing the test characters.

2. A simple optometer, consisting of two lenses, one of 4-inch and the other of 10-inch focal length; a brass holder with graduated bar and sliding test-type holder; six test-type cards, numbered 1, for the measurement of defects of refraction and accommodation, and six type-test cards, numbered 2, for the measurement of astigmatism.

240. BACTERIOLOGICAL SET.

Baskets, wire, for sterilizer ____no.	4	Pipettes, 1-c. c ____no.	2
Bath, tripod for ____no.	1	Pipettes, 5-c. c ____no.	2
Bunsen's burner ____no.	1	Platinum wire, heavy, 10-cm ____pieces.	3
Dishes, double (Petri's) ____no.	12	Platinum wire, medium, 10-cm ____pieces.	6
Forceps, cover-glass, Stewart's pattern ____no.	2	Rubber gas tubing, ¼-inch ____yds.	2
Forceps, straight, small, medium fine ____no.	1	*Regulator, gas (Reichert's)* ____no.	1
Flasks (Erlenmeyer's) 250-c. c ____no.	6	*Sterilizer, hot air, cm. 38 by 28 by 25.5* ____no.	1
Flasks (Erlenmeyer's) 500-c. c ____no.	2	Stopcocks (Mohr's) for rubber tubing ____no.	2
Flasks (Erlenmeyer's) 1,000-c.c ____no.	2	*Syringe (Stroschin's), 1-c. c* ____no.	1
Glass funnels, 25-c. c ____no.	4	Test measure, footed, 10-c. c ____no.	1
Glass funnels, 500-c. c ____no.	2	*Test tube, bath for, copper* ____no.	1
Glass funnels, 1,000-c. c ____no.	2	Test tubes, thin glass, 15-cm. by 18-mm. bore ____no.	300
*Incubator, lead-lined, cm. 45.5 by 21.5 by 30.5** ____no.	1	*Thermometer, 0-50° C* ____no.	2
Microburner, 1 flame ____no.	1	*Thermometer, 0-200° C* ____no.	1
Paper, filtering (Swedish) ____qrs.	2		
Paper, Litmus, blue and red, best quality of each ____sheets.	2		

*At stations where there is no gas, an incubator, to be heated by petroleum flame, may be obtained upon application.

241. CHEMICAL SET.

Chemical reagents and appliances, subject to the approval of the Surgeon General, will be issued to medical officers upon special requisition.

242. CONTENTS OF TOOL CHEST.

Awl, brad, and handle, 1 by $\frac{1}{16}$ inch wide ---------- no.	1
Awl, brad, and handle, $1\frac{1}{2}$ by $\frac{3}{8}$ inch wide ---------- no.	1
Awl, brad, and handle, 2 by $\frac{1}{8}$ inch wide ---------- no.	1
Awl, scratch, cast steel, 8-inch ---- no.	1
Bit, gimlet, double cut, No. 1, cast steel ---------- no.	1
Bit, gimlet, double cut, No. 2, cast steel ---------- no.	1
Bit, gimlet, double cut, No. 3, cast steel ---------- no.	1
Bit, screw-driver, extra cast steel, polished ---------- no.	1
Chalk line, soft, with reel and awl, complete ---------- no.	1
Chisel firmer, cast-steel socket, $\frac{1}{2}$-inch ---------- no.	1
Chisel firmer, cast-steel socket, 1-inch ---------- no.	1
Chisel firmer, cast-steel socket, $1\frac{1}{2}$-inch ---------- no.	1
Chisel, $\frac{3}{8}$-inch ---------- no.	1
Chisel, cold ---------- no.	1
Countersink ---------- no.	1
Divider, with set screw, solid cast steel, 8-inch ---------- no.	1
Drawing knife, carpenter's, oval blade, 10-inch ---------- no.	1
Extension bit ---------- no.	1
File, handsaw, with handle, 3 inches long ---------- no.	1
File, handsaw, with handle 4 inches long ---------- no.	1
File, handsaw, with handle, $4\frac{1}{2}$ inches long ---------- no.	1
File, bastard, flat, with handle, 10 inches long ---------- no.	1
Gimlet, double cut, wooden handle, No. 1 ---------- no.	1
Gimlet, double cut, wooden handle, No. 2 ---------- no.	1
Gimlet, double cut, wooden handle, No. 3 ---------- no.	1
Gauge, marking, beechwood, with set screw ---------- no.	1
Hammer, nail, adz-eye, cast steel ---------- no.	1
Hatchet, shingling ---------- no.	1
Keyhole saw ---------- no.	1
Mallet, carpenter's, mortised handle, 5 inches long ---------- no.	1
Nail puller, large ---------- no.	1
Nail set, square, polished, solid cast steel, $\frac{1}{4}$-inch ---------- no.	1
Nails, box of, steel wire, assorted, (Solomon Gundy) ---------- no.	1
Nippers, plier and cutting, combined, 6-inch ---------- no.	1
Oiler, zinc, No. 2 ---------- no.	1
Oilstone (Washita), $1\frac{1}{2}$ lbs ---------- no.	1
Pinchers, carpenter's, steeljaw, 10-inch ---------- no.	1
Plane, fore, double iron ---------- no.	1
Plane, jack, double iron ---------- no.	1
Plane, rabbet, double iron ---------- no.	1
Plane, smoothing, double iron ---------- no.	1
Plane, hollow, No. 10 ---------- no.	1
Plane, rounding, No. 10 ---------- no.	1
Ratchet, brace ---------- no.	1
Rat-tail file ---------- no.	1
Ratchet screw-driver, 5-inch ---------- no.	1
Rasp, wood, oval, with handle, 10 inches long ---------- no.	1
Rule, boxwood, square joints, 8ths and 16ths, 1 inch wide, 2-foot ---------- no.	1
Sliding T bevel ---------- no.	1
Saw, set ---------- no.	1
Saw, hand, 26-inch ---------- no.	1
Saw, panel, 16-inch ---------- no.	1
Saw, rip ---------- no.	1
Screw-driver, solid cast steel, 3-inch ---------- no.	1
Screw, hand, 8-inch ---------- no.	1
Screw wrench, wrought bar, 10-inch ---------- no.	1
Spirit level, pocket, iron top plate, japanned ---------- no.	1
Spokeshave, wood, 3-inch ---------- no.	1
Try-square, rosewood, graduated steel blade, 9-inch ---------- no.	1
Vise, bench and iron ---------- no.	1

243. CONTENTS OF HOSPITAL CORPS POUCH.

Ammoniæ spiritus aromaticus, in flask with cup ____c. c.	60	First-aid packets ____no.	6
Bandages, gauze, sterilized ____no.	6	*Jackknife and saw blade* ____no	1
Case, containing pins, common and safety, *scissors, and dressing forceps* ____no.	1	*Rubber bandage* ____no.	1
		Splints, wire gauze for, in roll ____yd.	1
		Surgical plaster ____spool.	1

244. CONTENTS OF ORDERLY POUCH.

Ammoniæ spiritus aromaticus, in *flask with cup* ____c. c.	60	Ligatures, silk, sterilized, 3 sizes ____pkgs.	6
Bandages, gauze, sterilized ____no.	6	Mist, chloroformi et opii, in *case*, fluid or tablets ____c. c.	30
Case, pocket ____no.	1	Pins, common and safety, of each ____paper.	1
Chloroform, in *case* ____gms.	100	*Rubber bandage* ____no.	1
Catheter, Eng., rubber, in box ____no.	1	*Scissors* ____no.	1
Diagnosis tags and pencil ____book.	1	Splints, wire gauze for, in roll ____no.	1
First-aid packets ____no.	4	Surgical plaster ____spool.	1
Gauze, sublimated, 1-m. pieces ____no.	4	*Syringe, hypodermic* ____no.	1
Jackknife, with saw blade ____no.	1		
Ligatures, catgut, sterilized, 3 sizes ____pkgs.	6		

Pocket case contains in pocket, surgeon's needles, silver wire, silk and silkworm gut ligatures.

245. ICE MACHINES AND THEIR EQUIPMENT.

Ice machines and their equipment vary in accordance with the terms of the contract on which they are purchased.

For convenient reference the following lists are appended, although the articles are not issued by the Medical Department:

246. ISSUED BY THE QUARTERMASTER'S DEPARTMENT.

Ambulance.	*Hatchet.*	*Shelter for meteorological instruments.*
Ambulance, harness for.	*Ladder.*	*Spade.*
Ax.	*Lamps, bracket.*	*Stoves, heating.*
Clothing, uniforms, etc.	*Lamps, hanging.*	*Tentage, etc.*
Cooking utensils.	*Lockers.*	*Travois.*
Dippers.	*Piping for ranges and stoves.*	*Wheelbarrow.*
*Flags.**	*Range and fixtures.*	*Wood saw.*
Gas Fixtures.	*Shovel.*	
Handcart.		

*See A. R. 214.

247. ISSUED BY THE ORDNANCE DEPARTMENT.

Canteen.	*Haversack strap.*	*Shotgun, Springfield.*‡
Canteen strap.	*Knife.*	*Shotgun, reloading outfit.***
Cup, tin.	*Meat can.*	*Spoon.*
Fork.	*Revolver.**	*Waist belt.*
Haversack.	*Rifle, Springfield, M. L.*†	*Waist-belt plate.*

* Revolvers will be obtained from the commanding officer for service in an Indian country, when necessary.

† The issue of two Springfield muzzle-loading rifles to each military post for company bearers' drill is authorized. Decision Acting Secretary of War, 1888.

‡ "Upon requisition of the Surgeon (through the usual military channels), duly approved by the Surgeon General, the Ordnance Department will issue, for use at posts west of the Mississippi River, a shotgun, with necessary appendages and ammunition, for the use of members of the Hospital Corps." Decision Chief of Ordnance, 1889.

** The reloading outfit of the shotgun consists of the following. Expendable articles may be replaced by annual requisition upon the Chief Ordnance Officer of the Department:

Brush wiper	no. 1	*Drift*	no. 1
Canister, tin, for powder, 2-lb	no. 1	*Funnel*	no. 1
Canister, tin, for powder, 5-lb	no. 1	Gun wads, No. 18, pink edge	no. 2,000
Cartridge primers	no. 1,000	*Packing box*	no. 1
Cartridge shells, 20-gauge	no. 50	Powder, musket	lbs. 7
Charger, adjustable	no. 1	*Priming tool (Frankford)*	no. 1
Cotton cloth	yd. 1	Shot, No. 8	lbs. 50
Cotton waste	lbs. 1¼		

FIELD SUPPLY TABLE.

248. FOR BRIGADE SECTION OF FIELD HOSPITAL.

MEDICINES.

Acidum arsenosum, 1-mgm. tablets (125 in bottle)	botts. 10	Ammonii chloridi trochisci (100 in bottle)	botts. 20
Acidum boricum, 324-mgm. tablets (125 in bottle)	botts. 6	Amyl nitras (5-drop pearls) 12 in box	boxes. 4
Acidum carbolicum, in 250-c. c. bottles	botts. 25	Antipyrinum, 324-mgm. tablets, in 125-gm. bottles	botts. 10
Acidum nitricum, in 250-c. c. g. s. bottles	botts. 4	Argenti nitras, in crystals, in 25-gm. bottles	botts. 3
Acidum oxalicum, for surgical use, in 500-gm. bottles	botts. 3	Argenti nitras fusus, in 25-gm. bottles	botts. 3
Acidum sulphuricum aromaticum, in 250-c. c. g. s. bottles,	botts. 20	Atropinæ sulphas, 0.65-mgm. hypodermic tablets	tubes. 6
Aconiti tinctura, 0.1-c. c. tablets (200 in bottle)	botts. 5	Belladonnæ emplastrum, in 2-meter tins	tins. 10
Ætheris spiritus compositus, in 250-c. c. bottles	botts. 50	Bismuthi subnitras, in 500-gm. bottles	botts. 30
Ætheris spiritus nitrosi, in 250-c. c. bottles	botts. 4	Caffeina citrata, in 65-mgm. tablets, 100 in bottle	botts. 4
Alcohol, in 1-liter bottles	botts. 20	Camphora, in 500-gm. bottles,	botts. 72
Ammoniæ aqua, 10-p. c., in 500-c. c. g. s. bottles	botts. 20	Cantharidis emplastrum, in 1-meter tins	tins. 12
Ammoniæ spiritus aromaticus, in 250-c. c. bottles	botts. 15	Capsici tinctura, in 100-c. c bottles	botts. 5
Ammonii carbonas, in 250-gm. bottles	botts. 6	Chloral, in 50-gm. g. s. bottles,	botts. 10
			botts. 4

MEDICINES—Continued.

Chloroformum, in 250-c. c. bottles—botts.	75
Cocainæ hydrochloras, 10-mgm. hypodermic tablets, in 15-c. c. bottles—botts.	8
Codeina, in 32-mgm. tablets, 100 in bottle—botts.	5
Collodium, in 25-c. c. bottles, botts.	25
Copaibæ pilulæ comp. or tablets (500 in bottle)—botts.	10
Digitalinum, in 1-mgm. hypodermic tablets—tubes.	5
Digitalis tinctura, 0.3-c. c. tablets (200 in bottle)—botts.	20
Emplastrum ferri, in boxes of 24—boxes.	10
Ergotinum, 130-mgm. tablets (200 in bottle)—botts.	4
Ferri chloridi tinctura, in 500-c. c. g. s. bottles—botts.	8
Ferri pilulæ compositæ (200 in bottle)—botts.	25
Glycerinum, in 500-c. c. bottles, botts.	20
Glycyrrhizæ mistura composita, tablets (400 in bottle)—botts.	20
Guaiacolis carbonas, in 25-gm. bottles—botts.	4
Hydrargyri chloridum mite cum sodii bicarb. tablets, in 100-gm. bottles—botts.	10
Hydrargyri iodidum flavum, 10-mgm. tablets (200 in bottle), botts.	10
Hydrargyri massa, 324-mgm. tablets (125 in bottle)—botts.	5
Hydrargyri unguentum, in 500-gm. jars—jars.	4
Hyoscyami pilulæ compositæ (200 in bottle)—botts.	4
Ichthyolum, in 25-gm. bottles, botts.	8
Iodoformum, in 100-gm. bottles, botts.	12
Iodum, in 50-gm. g. s. bottles, botts.	4
Ipecacuanha, 65-mgm. tablets (200 in bottle)—botts.	10
Ipecacuanhæ et opii pulvis, 234-mgm. tablets (200 in bottle), botts.	10
Ipecacuanhæ extractum fluidum, in 250-c. c. bottles, botts.	4
Linimentum rubefaciens, tablets (50 in bottle)—botts.	25
Magnesii sulphas, in 4-kilo tins, tins.	10
Menthol, in 50-gm. bottles, botts.	4
Morphinæ sulphas, 8-mgm. tablets (100 in bottle)—botts.	6
Morphinæ sulphas, 8-mgm. hypodermic tablets—tubes.	50
Nitroglycerinum, 0.65-mgm. hypodermic tablets—tubes.	6
Oleum menthæ piperitæ, in 100-c. c. bottles—botts.	6
Oleum ricini, in 1-liter bottles, botts.	50
Oleum terebinthinæ, in 1-liter bottles—botts.	12
Oleum theobromatis, in 250-gm. tins—tins.	4
Petrolatum spissum, 46.6° C., in 500-gm. tins—tins.	4
Phenacetinum, 324-mgm. tablets (100 in bottle)—botts.	15
Pilulæ camphoræ et opii, or tablets (200 in bottle—botts.	25
Pilulæ carminativæ (200 in bottle)—botts.	10
Pilulæ catharticæ compositæ, or tablets (200 in bottle—botts.	40
Plumbi acetas, 130-mgm. tablets (100 in bottle)—botts.	8
Potassa, in 25-gm. bottles—botts.	2
Potassii arsenitis liquor, in 250-c. c. bottles—botts.	6
Potassii bromidum, 324-mgm. tablets (500 in bottle)—botts.	12
Potassii et sodii tartras (pulvis), in 500-gm. bottles—botts.	15
Potassii iodidum, 324-mgm. tablets (200 in bottle)—botts.	10
Potassii permanganas, 324-mgm. tablets (200 in bottle)—botts.	15
Quininæ hydrochlorosulphas, 65-mgm. hypodermic tablets, tubes.	50
Quininæ sulphas, 200-mgm. tablets or pills (500 in bot.), botts.	100
Salol, 324-mgm. tablets (125 in bottle)—botts.	25
Sinapis emplastrum, in 4-meter tins—tins.	50
Sinapis nigra (pulvis), in 500-gm. tins—tins.	10
Sodii bicarbonas, 324-mgm. tablets (200 in bottle)—botts.	50
Sodii bicarb. et menthæ pip., tablets (250 in bottle)—botts.	10
Sodii boras (pulvis), in 500-gm. bottles—botts.	5
Sodii salicylas, 324-mgm. tablets (200 in bottle)—botts.	10
Strychninæ sulph., 1-mgm. hypo. tablets (500 in bottle)—botts.	25
Sulphonal, 324-mgm. tablets (150 in bottle)—botts.	10
Zinci oxidum, in 250-gm. bottles—botts.	5
Zinci sulphas, 324-mgm. tablets (100 in bottle)—botts.	10
Zingiberis extractum fluidum, in 250-c. c. bottles—botts.	10

249. ANTISEPTICS AND DISINFECTANTS.

Antiseptic tablets, hydrarg. chlor. corros. (200 in bottle)—botts.	15	Mercury, corrosive chlorid, in 500-gm. bottles—botts.	12
Lime, chlorid, in 500-gm. w. m. bottles—botts.	48	Tricresol, in 1-kilo bottles—botts. (Or its equivalent in 1-lb. botts.)	18

250. HOSPITAL STORES.

Arrowroot, in 250-gm. packages—pkgs.	28	Gelatin, in 50-gm. packages, pkgs.	15
Beef extract, liquid, Wyeth's, or equivalent preparation, in 100-c.c. bottles—botts.	60	Malted milk, in 5-lb. tins—tins.	10
Brandy, in 1-liter bottles—botts.	12	Soap, castile, or its equivalent, kilos.	7
Chocolate, sweetened, in 100-gm. bars—bars.	60	Sugar, white, in 6-kilo tins—tins.	8
Condensed milk, in 500-gm. tins—tins.	72	Whisky, in 1-liter bottles—botts.	36

251. STATIONERY.

Blank books, cap, 4-quire—no.	6	Pads, prescription—no.	48
Blank books, 8vo, 4-quire—no.	6	Pads, letter—no.	15
Envelopes, official-letter—no.	1,200	Paper, blotting—qrs.	1
Ink, writing, in 120-c. c. bottles—botts.	8	Paper, writing, letter—qrs.	50
Ink, carmine, in 30-c. c. bottles—botts.	3	Pencils, lead—no.	25
Mucilage—botts.	6	Penholders—no.	12
		Pens, steel—gross.	1

252. SURGICAL INSTRUMENTS, APPPLIANCES, AND DRESSINGS.

Bandages, gauze, sterilized, 144 in box, 3 sizes—gross.	36	Muslin, unbleached—meters.	40
Bandages, plaster—gross.	1	Pins, assorted—papers.	20
Bandages, rubber, 4 meters by 33 mm—no.	4	Pins, safety, 3 sizes—doz.	40
Bandages, suspensory—no.	24	Plaster, adhesive, on spools, 2½-cm—no.	50
Case, emergency—no.	2	Plaster, adhesive, on spools, 5-cm—no.	12
Case, pocket—no.	3	Plaster, isinglass, in 1-meter rolls—meters.	4
Cotton, absorbent, sterilized, in 1-oz. packages—kilos.	25	Plaster of paris, in 2-kilo tins, kilos.	20
First-aid packets, as required—no.	-------	Rubber sheeting—meters.	20
Gauze, sublimated, in packages, 1 meter each—pkgs.	1,000	Silk, oiled, in 5-meter rolls, meters.	30
Gauze, iodoform, in packages, ¼ meter each—pkgs.	200	Splints, wire for—pieces.	50
Ligatures, catgut, sterilized, in packages, 3 sizes—no.	300	Sponges, compressed cotton, 4 dozen in box—boxes.	50
Ligatures, silk, sterilized, in packages, 3 sizes—no.	300	Thermometers, clinical—no.	30
Microscope and accessories, as given in pars. 211 and 236 *—	-------	*Tourniquet, rubber (Esmarch's)* no.	4
		Trusses, single—no.	6

*One to each division hospital.

253. FURNITURE, BEDDING, AND CLOTHING.

Basins, wash, hand, agate ware	no.	15	*Pillows, feather*	no.	20
Blanket cases	no.	32	*Pillows, hair*	no.	100
Blankets, gray	no.	200	*Pillowcases, cotton*	no.	300
Desk, field	no.	1	*Sheets, cotton*	no.	300
Furniture, field, folding	sets.	17	*Shirts, cotton*	no.	200
Mosquito bars	no.	100	Towels, hand	doz.	60
Pajamas	no.	200	*Towels, bath*	doz.	12

254. MISCELLANEOUS.

Bathtubs, rubbered duck	no.	4	*Dippers*	no.	6
Bedpans, agate ware	no.	6	Envelopes for tablets, 5 by 6 cm	doz.	100
Boxes, pill	doz.	15	*Filter, Maignen*	no.	1
Boxes, powder	doz.	15	*Hatchets*	no.	4
Brooms	no.	6	Labels for vials	gross.	3
Brushes, for cleansing	no.	12	Lantern glasses, extra, red or white, as required		
Buckets, fiber or wood	no.	8	Lantern wicks, as required	no.	
Buckets, agate, 3 in nest	nests.	2	*Lanterns*	no.	10
Chests, commode	no.	4	*Litters*	no.	20
Chest, food	no.	1	*Litter slings*	no.	50
*Chest, medical**	no.	1	*Medicine glasses*	no.	12
Chest, mess	no.	1	Paper, wrapping, brown	qrs.	4
*Chest, sterilizer**	no.	1	*Saw, hand, small*	no.	1
*Chest, surgical**	no.	1	Syringes, penis, glass, in case	no.	50
Corks, assorted in bags of 12 dozen	doz.	24	Talcum (French chalk), 1-kilo, packages	kilos.	2
Crutches	pairs.	6	Test tubes, in nests of 3	no.	12
Crutches, rubber tips for	no.	12	*Urinals, agate ware*	no.	3
Cups, spit, paper, dozen	doz.	4	Vials, 30-c. c	doz.	12
Cushions, rubber, small	no.	2			
Cushions, rubber, with open center	no.	2			

*Pattern of 1900. The set of five chests, pattern 1898, may be issued instead of this set.

255. MEDICAL AND SURGICAL CHESTS, PATTERN OF 1900.

This set consists of U. S. A. regimental medical chest, U. S. A. regimental surgical chest, U. S. A. regimental sterilizer chest, box of surgical dressings, and Maignen filter.

CONTENTS OF U. S. A. REGIMENTAL MEDICAL CHEST.

Left.—Tray.					
Atomizer, hand	no.	1	Ointment boxes, wood, 3 in nest	nests.	8
Bags, rubber, hot-water	no.	2	Pencils, lead	no.	2
Blank book	no.	1	*Spatula*	no.	1
Corkscrew	no.	1	*Stethoscope, double*	no.	1
Cups, tin, nested	no.	2	*Syringe, h. r.*, 60 c. c	no.	1
Envelopes for tablets	no.	500	*Tape measure*	no.	1
Labels for vials	no.	50	*Teaspoon*	no.	1
Measure, glass, graduated, 100-c. c	no.	1	*Thermometer, bath*	no.	1
Medicine glass, in case	no.	1	*Tongue depressor*	no.	1
Mortar and pestle, porcelain, small	no.	1	Trusses, single	no.	3
			Tubes, lavage	no.	2
			Washers, rubber, extra, for cans	box.	1

CONTENTS OF U. S. A. REG'L MEDICAL CHEST—Continued.

Left.—Tray—Continued.

In 80-c. c. enameled tin cans.

Acidum arsenosum, 1-mgm. tablets	can	1
Argenti nitras, cones	can	1
Caffeina citrata, 65-mgm. tablets	can	1
Codeina, 32-mgm. tablets	can	1
Colchicum, ext. fl., 0.065-c. c. tablets	can	1
Cupri arsenis, 0.325-mgm. tablets	can	1
Digitalis tinctura, 0.3-c. c tablets	can	1
Guaiacolis carbonas, 324-mgm. tablets	can	1
Oleum tiglii, 0.006-c. c. tablets,	can	1
Pil. aloini comp., tablets	can	1

Drawer, Front of Left Tray.

HYPODERMIC TABLETS.

In 15-c. c. bottles.

Morphinæ sulphas, 8-mgm. tablets	bott	1
Strychninæ sulphas, 1-mgm. tablet	bott	1

In 10-c. c. bottles.

Apomorphinæ hydrochloras, 6-mgm. tablets	bott	1
Atropinæ sulphas, 0.65-mgm. tablets	bott	1
Cocainæ hydrochloras, 10-mgm. tablets	bott	1
Digitalinum, 1-mgm. tablets	bott	1
Hyoscinæ hydrobromas, 0.65-mgm. tablets	bott	1
Nitroglycerinum, 0.65-mgm. tablets	bott	1
Quininæ hydrochlorosulphas, 65-mgm. tablets	bott	1
One tube of each of the above hypodermic tablets, except Quin. hydrochlorosulph. tubes		8
Amyl nitris, pearls, 1 doz. in box	box	1
Medicine droppers	no	6
Paper, litmus	book	1
Pencils, camel's hair	no	12
Syringes, hypodermic	no	2
Syringe, hypodermic, needles for	no	4
Test tubes, in nests of 3	nests	2
Thermometer, clinical	no	4

Left.—Bottom.

In 1-kilo enameled tin cans.

Magnesii sulphas	cans	2
Potassii et sodi tartras	can	1

In 350-c. c. enameled tin cans.

Ammonii chloridi trochisci	can	1
Antiseptic tablets	can	1
Bismuthi subgallas	can	1
Bismuthi subnitras	can	1
Ipecacuanhæ et opii pulvis, 324-mgm. tablets	can	1
Petrolatum	can	1
Phenacetinum, 324-mgm. tablets	can	1
Pilulæ camphoræ et opii, tablets	can	1
Pilulæ catharticæ comp., tablets	can	1
Pil. copaibæ comp., tablets	can	1
Potassii bicarbonas, 324-mgm. tablets	can	1
Potassii iodidum, 324-mgm. tablets	can	1
Quininæ sulphas, 200-mgm. tablets	cans	3
Sodii bromidum, 324-mgm. tablets	can	1
Sodii salicylas, 324-mgm. tablets	can	1
Sulphonal, 324-mgm. tablets	can	1
Towels, hand	no	6
Pill tile, hard rubber	no	1

Right.—Tray.

In 150-c. c. enameled tin cans.

Acidum boricum, 324-mgm. tablets	can	1
Acidum tannicum, 324-mgm. tablets	can	1
Antipyrinum, 324-mgm. tablets	can	1
Chloral, 324-mgm. tablets	can	1
Glycyrrhizæ mistura composita tablets (1 tablet = 4 c. c.)	can	1
Hydrargyri chloridum mite cum sodii bicarb., tablets	can	1
Hydrargyri iodidum flavum, 10-mgm. tablets	can	1
Linimentum rubefaciens, tablets	can	1
Opii tinctura camphorata, tablets (1 tablet = 4 c. c.)	can	1
Pilulæ carminativæ, tablets	can	1
Potassi permanganas, 324-mgm. tablets	can	1
Salol, 324-mgm. tablets	can	1
Sodii bicarbonas, 324-mgm. tablets	can	1
Sodii bicarbonas et mentha pip., tablets	can	1
Warburg's tincture, tablets (1 tablet = 4 c. c)	can	1

CONTENTS OF U. S. A. REG'L MEDICAL CHEST—Continued.

Right.—Tray—Continued.	
In 30-c. c. enameled tin cans.	
Plumbi acetas, 130-mgm. tablets—can	1
Podophylli resina, 16-mgm. tablets—can	1
Rhamni purshianæ, ext., 130-mgm. tablets—can	1
Zinci sulphas, 324-mgm. tablets—can	1
Right.—Bottom.	
In 250-c. c. bottles.	
Acidum sulphuricum aromaticum—bott	1
Ætheris spiritus nitrosi—bott	1
Ammoniæ spiritus aromaticus, bott	1
Glycerinum—bott	1
Oleum terebinthinæ—bott	1
Extra corks (for 250-c. c. botts.)—no	6
Acidum nitricum, in 30-c. c. bottle in wooden case—bott	1
Alcolia burners, filled—no	6
Corks (for 30-c. c. and 60-c. c. vials)—no	48
Emplastrum belladonnæ, in 2-meter tins—tins	2
Emplastrum cantharidis, in 1-meter tins—tin	1
Emplastrum sinapis, in 4-meter tins—tins	2
Syringe, p. glass, in wooden case—no	6
Vials, empty, 30-c. c—no	12
Vials, empty, 60-c. c—no	12

Cover, canvas, for chest—no. 1

CONTENTS OF U. S. A. REGIMENTAL SURGICAL CHEST.

Left.—Tray.	
Corkscrew—no	1
Fuses—boxes	6
Ligatures, cat-gut, Nos. 1, 2, and 3—no	100
Ligatures, silk, Nos. 1, 2, and 3—no	80
Pencils, lead—no	6
Pins, common—papers	2
Pins, safety—doz	8
Plaster, adhesive, 2½ c. m. wide—spools	6
Plaster, isinglass, in 1-meter tins—tin	1
Scissors—no	1
Spongeholders, for throat—no	2
Sprinkler, iodoform, filled—no	1
Tubes, drainage, 0.6 and 1 cm., of each ½ meter in envelope—envel	2
Drawer, Left Side Left Tray.	
HYPODERMIC TABLETS.	
In 15-c. c. bottles.	
Morphinæ sulphas, 8-mgm. tablets—bott	1
Strychninæ sulphas, 1-mgm. tablets—bott	1
In 10-c. c. bottles.	
Apomorphinæ hydrochloras, 6-mgm. tablets—bott	1
Atropinæ sulphas, 0.65-mgm. tablets—bott	1
Cocainæ hydrochloras, 10-mgm. tablets—bott	1
Digitalinum, 1-mgm, tablets, bott	1
Nitroglycerinum, 0.65-mgm. tablets—bott	1
Quininæ hydrochloro sulphas, 65-mgm. tablets—bott	1
One tube of each of the above hypodermic tablets, except Quin. hydrochlorosulph. tubes	7
Syringe, hypodermic—no	1
Syringe, hypodermic, extra needles for—no	2
Thermometers, clinical—no	4
Wire, silver—coil	1
Left.—Bottom.	
Alcolia burners, filled—no	6
Bandages, suspensory, asst'd—no	4
Bougies and catheters, six of each, in box—box	1
Case, aspirating—no	1
Case, field-operating—no	1
Case, pocket—no	1
*Case, tooth-extracting**—no	1
Cups, tin, nested—no	2
Razor—no	1
Razor strop—no	1
Speculum, rectal—no	1
Tourniquets (Esmarch's)—no	2
Towels, hand—no	6
In 350-c. c. enameled tin cans.	
Antiseptic tablets—can	1
Normal saline solution, tablets—can	1

*Six dental forceps and one elevator in chamois-lined canvas or leather case.

CONTENTS OF U. S. A. REG'L SURGICAL CHEST—Continued.

Left.—Bottom—Continued.	
Petrolatum ____ cans.	2
Sodii carbonas, 2-gm. tablets ____ can.	1
Cotton, absorbent, 1-oz. packages ____ pkgs.	8
Gauze, sublimated, 1-meter packages ____ pkgs.	12
Right.—Tray.	
Bandages, gauze, 2½ and 3 inches ____ no.	54
Blank book ____ no.	1
Flushing bags, with tube ____ no.	2
Inhaler, chloroform ____ no.	1
Surgery, Zuckerkandl ____ copy.	1
Tags, diagnosis ____ books.	4
Right.—Bottom.	
In 750-c. c. bottles.	
Alcohol ____ botts.	2
Brandy ____ botts.	2
In 250-c. c. bottles.	
Chloroform ____ botts.	8
Extra corks (for 750 and 250 c. c. bottles) ____ no.	12

Cover, canvas, for chest ____ no. 1

CONTENTS OF U. S. A. REGIMENTAL STERILIZER CHEST.

Left Front.	
Berkefeld filter, with stirrup and intake tube ____ no.	1
Splints, wire gauze ____ pieces.	8
Splints, wood, veneer ____ pieces.	6
Rear.	
In 250-c. c. bottles.	
Acidum carbolicum ____ botts.	2
Tricresol ____ botts.	2
Extra corks (for 250-c. c. bottles) ____ no.	6
Alcolia, in 1-kilo tins ____ tins.	2
Aprons, rubber ____ no.	3
Bands, rubber ____ no.	32
Basin, rubber ____ no.	4
Cases, rubber, for gloves, etc ____ no.	2
Cots, finger, rubber ____ no.	16
Cylinder, extra, for Berkefeld filter ____ no.	1
Gloves, rubber ____ pairs.	4
Sterilizer (Arnold's) ____ no.	1
Water-can, tin ____ no.	1
Right Tray.	
Alcolia burners, filled ____ no.	6
Brushes, hand, scrub ____ no.	6
Fuses ____ boxes.	6
Soap box with soap ____ no.	1
Sterilizer, instrument (2 trays nested) ____ no.	1
Tags, diagnosis ____ books.	4
Washers, rubber, extra, for cans ____ box.	1
Bottom.	
Plaster of paris, *in 1-kilo tins* ____ tins.	2
Soap, germicidal ____ cakes.	5
Soap, green, *in 500-gm. tins* ____ tins.	2
Tool, universal ____ no.	1
Towels, hand ____ no.	12

Cover, canvas, for chest ____ no. 1

SURGICAL DRESSINGS.

(Contained in wooden packing box.)

Bandages, gauze, sterilized, 3-inch, in protective coverings, each 6 yards ____ no.	144
Bandages, gauze, sterilized, 2½-inch, in protective coverings, each 6 yards ____ no.	144
Cotton, absorbent, sterilized, in 1-oz. sealed packets ____ packets.	96
Gauze, absorbent, sterilized, in 1-meter packets ____ packets.	150
Gauze, absorbent, sterilized, sublimated, in 1-meter packets ____ packets.	48
Gauze, iodoform, sterilized, in ½-meter packets ____ packets.	24
Sponges, compressed cotton, 48 in box ____ boxes.	8

MAIGNEN FILTER.

256. MEDICAL AND SURGICAL CHESTS, PATTERN OF 1898.

This set consists of medical chest, No. 1; medical chest, No. 2; surgical chest, No. 1; surgical chest, No. 2; sterilizer chest, and Maigneu filter.

CONTENTS OF MEDICAL CHEST (No. 1).

Top Drawer.

LEFT.

In 120-c. c. bottles.

Ammonii chloridi trochisci	bott.	1
Camphora	bott.	1
Glycyrrhizæ mist. comp. tablets	bott.	1
Linimentum rubefaciens, tablets	bott.	1
Pilulæ carminativæ	bott.	1
Pilulæ catharticæ compositæ	bott.	1
Potassii bromidum, tablets	bott.	1
Quininæ sulphas, pills	bott.	1
Sodii bicarbonas, tablets	bott.	1
Sodii bicarb, et mentha pip. tablets	bott.	1
Sodii salicylas, tablets	bott.	1
Warburg's tincture, pills (1 pill=1 drachm)	bott.	1

RIGHT.

In 60-c. c. bottles.

Acidum tannicum	bott.	1
Antipyrinum, tablets	bott.	1
Bismuthi subgallas	bott.	1
Bismuthi subnitras	bott.	1
Chloral	bott.	1
Collodium	bott.	1
Ferri chloridi tinctura	bott.	1
Hydrargyri massa, tablets	bott.	1
Iodum	bott.	1
Ipecacuanha, tablets	bott.	1
Ipecacuanha et opium, tablets	bott.	1
Morphinæ sulphas, tablets	bott.	1
Phenacetinum, tablets	bott.	1
Pilulæ camph. et opii	bott.	1
Potassii arsenitis liquor	bott.	1
Potassii iodidum, tablets	bott.	1
Potassii permanganas	bott.	1
Salol, tablets	bott.	1
Sodii boras	bott.	1
Veratri viridis tinctura	bott.	1
Zinci sulphas, tablets	bott.	1

Small Drawer at Right of Lower Drawer.

In 15-c. c. bottles.

Acidum arsenosum, tablets	bott.	1
Aconiti tinctura, tablets	bott.	1
Aloini pilulæ comp	botts.	2
Ammonii carbonas	bott.	1
Argenti nitras, in crystals	bott.	1
Argenti nitras fusus	bott.	1
Caffeina citrata, tablets	bott.	1
Cannabis indicæ tinctura, tablets	bott.	1
Capsicum, tablets	bott.	1
Cocainæ hydrochloras, hypod. tablets	bott.	1
Codeina, tablets	bott.	1
Cupri arsenis, tablets	botts.	2
Digitalis tinctura, tablets	botts.	2
Ergotinum, tablets	bott.	1
Guaiacolis carbonas	bott.	1
Hydrarg. chlor. mite cum sodii bicarb., tablets	botts.	3
Hydrarg. iodidum flavum, tablets	bott.	1
Hyoscyami pilulæ compositæ	bott.	1
Ichthyolum	bott.	1
Menthol	bott.	1
Oleum tiglii, tablets	bott.	1
Opii pilulæ	botts.	2
Plumbi acetas, tablets	botts.	2
Podophylli resina, tablets	bott.	1
Quininæ hydrochlorosulphas hypod. tablets	bott.	1
Strychninæ sulphas, tablets	bott.	1
Sulphonal, tablets	bott.	1
Zinci oxidum	bott.	1

Rear Compartment.

Four tin cans.

Magnesii sulphas	kilos.	2½
Oleum ricini	liters.	2½
Potassii et sodii tartras	kilos.	2½
Sinapis nigra	kilos.	1½
Acidum nitricum, 30-c. c., in wooden case	bott.	1
Bandages, gauze, 3 sizes	no.	18
Bandages, suspensory	no.	4
Belladonnæ emplastrum, in 2-meter tin	tin.	1
Cantharidis emplastrum, in 1-meter tin	no.	1
Gauze, sublimated	pkgs.	6
Plaster, adhesive, 1-in.	spool.	1
Plaster, isinglass	tin.	1
Pocket case	no.	1
Sinapis emplastrum, in 4-meter tins	tins.	2
Sponges, compressed cotton	box.	1
Syringes, penis, glass	no.	6
*Tooth-extracting case**	no.	1
Vials, 1 doz. 30-c. c., 1 doz. 60-c. c	doz.	2

*Six dental forceps and one elevator in chamois-lined canvas or leather case.

CONTENTS OF MEDICAL CHEST (No. 1)—Continued.

Center of Drawer.

Alcohol lamp	no.	1
Corkscrew	no.	1
Corks for vials	doz.	2
Cup	no.	1
Envelopes for tablets	gross.	1
Labels for vials	doz.	2
Measures, graduated glass, 100-c. c. (in case)	no.	1
Medicine glass (in cup)	no.	1
Paper, filtering	pack.	1
Paper, litmus	book.	1
Pill boxes, small	doz.	2
Spatula	no.	1
Tongue depressor	no.	1
Urinometer (in case)	no.	1

Small Drawer at Right of Upper Drawer.

Hypodermic tablets, 5-c. c. botts.:		
Apomorph. hydrochloras	bott.	1
Atropinæ sulphas	bott.	1
Cocainæ hydrochloras	bott.	1
Digitalinum	bott.	1
Hyoscinæ hydrobromas	bott.	1
Morphinæ sulphas	bott.	1
Nitroglycerinum	bott.	1
Strychninæ sulphas	tubes.	3
Amyl nitris (5-drop pearls), 12 in box	box.	1
Clinical thermometers	no.	2
Hypodermic syringe	no.	1
Hypodermic syringe, extra needle for	no.	1
Hypodermic syringe, extra wires for	bdle.	1
Medicine droppers	no.	6
Pencils, camel's-hair	no.	6
Pencil, indelible	no.	1
Pencil, indelible, leads for	box.	1

Lower Drawer.

LEFT.

In 250-c. c. bottles.

Acidum carbolicum	bott.	1
Acidum sulph. aromat	bott.	1
Æther spiritus compositus	bott.	1
Æther spiritus nitrosi	bott.	1
Alcohol	bott.	1
Ammoniæ aqua	bott.	1
Ammoniæ spirit. aromat	bott.	1
Brandy	bott.	1
Glycerinum	bott.	1
Oleum terebinthinæ	bott.	1
Squibbs mixture	bott.	1
Tinctura opii camphorata	bott.	1
Probangs	no.	2
Sponge holders for throat	no.	2

RIGHT.

Atomisers, hand	no.	2
Copaibæ pilulæ comp	botts.	2
Speculum, rectal	no.	1
Stethoscope, double	no.	1
Test tubes	no.	6
Tape measure	no.	1

Cover, canvas, for chest no. 1

CONTENTS OF MEDICAL CHEST (No. 2).

Upper Drawer.

Bags, rubber, hot-water	no.	2
Bags, rubber, ice, for head	no.	1
Bougies and catheters, 6 of each, in box	box.	1
Thermometer	no.	1
Towels	no.	6
Trusses, single	no.	3

Lower Drawer.

Blank book	no.	1
Hygiene, Notter and Firth	no.	1
Medicine, Practice of, Osler	no.	1
Surgery, operative, Zuckerkandl	no.	1
Therapeutics, Hare	no.	1
Tropical Diseases, Manson	no.	1
Wounds in war, Stephenson	no.	1

Rear Compartment.

Pump, surgical	no.	1
Acidum tannicum, in 25-gm. bottles	botts.	4
Antipyrinum, 324-mgm. tablets (200 in bottle)	botts.	2
Bismuthi subgallas, in 250-gm. bottles	botts.	2
Bismuthi subnitras, in 500-gm. bottles	botts.	6
Capsicum, 32-mgm. tablets (150 in bottle)	botts.	4
Hydrargyri chloridum mite cum sodii bicarb., tablets (200 in bottle)	botts.	6
Ipecacuanhæ et opii pulvis, 324-mgm. tablets (200 in bott.)	bott.	1
Morphinæ sulphas, 8-mgm. tablets (100 in bottle)	botts.	6

CONTENTS OF MEDICAL CHEST (No. 2)—Continued.

Rear Compartment—Contin'd.	
Phenacetinum, 324-mgm, tablets (200 in bottle) ---------botts.	2
Pilulæ camphoræ et opii, or tablets (200 in bottle)-------botts.	4
Pilulæ catharticæ compositæ, or tablets (200 in bottles) --botts.	6
Podophylli resina, 16-mgm. tablets (100 in bottle)------botts.	4
Potassii bromidum, 324-mgm. tablets, (500 in bottle) --botts.	2
Quininæ sulphas, 200-mgm. pills (500 in bottle)---------botts.	6
Strychninæ sulphas, 1-mgm. tablets (500 in bottle)---botts.	2
Sulphonal, 324-mgm. tablets (200 in bottle)----------bott.	1

Some of these bottles may be packed in the drawers.

Cover, canvas, for chest---------- no. 1

CONTENTS OF SURGICAL CHEST (No. 1).

Top Drawer.	
LEFT.	
In 120-c. c. bottles.	
Hydrarg. bichlor., tablets--botts.	2
Petrolatum ----------bott.	1
Pil. camph. et opii ---------bott.	1
Pil. cath. comp----------bott.	1
Quin. sulph. 200-mgm. pills-bott.	1
Salt, table ----------bott.	1
Sodii carbonas, tablets------bott.	1
Normal saline sol., tablets*-bott.	1
In paper packets.	
Ligature, catgut, Nos. 1, 2, and 3 no.	100
Ligature, silk, Nos. 1, 2, and 3-no.	80
Tubes, drainage, 0.6 and 1 cm. of each ½ meter in envelope-envel.	2
RIGHT.	
Heater, alcohol----------no.	1
Corkscrew ----------no.	1
Pins, common----------pkg.	1
Pins, safety----------doz.	4
Scissors ----------no.	1
Soap, green, in tin ----------lb.	1
Tags, diagnosis----------pkgs.	5
Small Drawer at Right of Upper Drawer.	
Pencil, indelible----------no.	1
Pencil, indelible, leads for --box.	1
Syringe, hypodermic ---------no.	1
Thermometer, clinical -------no.	1
Wire, silver----------coil.	1
Hypodermic tablets.	
In 5-c. c. bottles.	
Apomorphinæ hydrochloras-bott.	1
Atropinæ sulphas ---------bott.	1
Cocainæ hydrochloras -----bott.	1
Digitalinum ----------bott.	1
Nytroglycerinum ---------bott.	1
Morphinæ sulphas --------bott.	1
Quininæ hydrochlorosulphas bott.	1
Strychninæ sulphas ------tubes.	3
Lower Drawer.	
LEFT.	
In 250-c. c. bottles.	
Acid, carbolic----------bott.	1
Alcohol----------botts.	3
Brandy ----------botts.	2
Chloroform ----------botts.	3
RIGHT.	
Basin, rubber ----------no.	1
Blank book----------no.	1
Brushes, hand, scrub -------no.	6
Cylinders, rubber (intest. suture) no.	2
Inhaler, chloroform---------no.	1
Plaster, rubber, adh------spools.	3
Sterilizer, instrument ---------no.	1
Strop, razor----------no.	1
Towels (in sterilizer) -------no.	6
Rear Compartment.	
Bandages, gauze, 2½, 3, and 3½ inches ----------no.	36
Case, field, operating---------no.	1
Cotton, absorbent, in 1-ounce packages----------pkgs.	36
Cup----------no.	1
Gauze, iodoform, in ¼-meter packages----------pkgs.	12
Gauze, sublimated, in 1-meter packages----------pkgs.	36
Sponges, cotton, compressed, large size----------doz.	12
Tourniquet, rubber (Esmarch's)-no.	1

Cover, canvas, for chest---------- no. 1

*See par. 217.

CONTENTS OF SURGICAL CHEST (No. 2).

Upper Drawer.	
Bandages, plaster, 2-inch ____no.	6
Beef extract (Armour's)____cans.	4
Milk, condensed _____cans.	4
Pliers, cutting, for fixed bandages, no.	1
Soap, germicidal_____cakes.	6
Sprinkler, iodoform _____no.	1
Tool, universal _____no.	1
*Tourniquet, rubber (Esmarch's)*_no.	1
Tow, in ¼-pound packages_pkgs.	4
Lower Drawer.	
Bandages, gauze, 3 sizes ____no.	50
Chloroform, in 250-c. c. bottles, botts.	4
Gauze, iodoform_____pkgs.	12
Gauze, sublimated, in 1-meter packages_____pkgs.	40
Rear Compartment.	
Five tin cans.	
Alcohol _____liters.	2½
Tea _____kilo.	½
Plaster of paris_____kilos.	2½
Tricresol _____liters.	2½
Sugar _____kilos.	1½
Cotton, absorbent, in 1-ounce packages _____pkgs.	32
Gauze wire _____pieces.	8
Splints, wooden, veneer____no.	9
Sponges, cotton compressed, 4 dozen in box _____doz.	20

*Cover, canvas, for chest*_____ no. 1

CONTENTS OF STERILIZER CHEST.

Top Drawer.	
LEFT.	
Aprons, rubber _____no.	3
Bands, rubber _____no.	24
Cases, rubber, for gloves, etc__cases.	2
Cots, finger _____no.	16
*Gloves, rubber*_____pairs.	4
*Rubber bag and tube, for flushing*_____no.	1
RIGHT.	
*Base of petroleum stove*_____no.	1
Lower Drawer.	
LEFT.	
Upper part of petroleum stove __no.	1
RIGHT.	
Sterilizer (Arnold's) _____no.	1
Matches, safety_____boxes.	6
Wicks _____pkg.	1
Rear Compartment.	
Berkefeld filter _____no.	1
*Can for petroleum*_____no.	1
*Can for water*_____no.	1
Dipper _____no.	1

*Cover, canvas, for chest*_____ no. 1

MAIGNEN FILTER.

257. MEDICAL AND SURGICAL CHEST FOR DETACHED SERVICE.

(This chest is for issue to a battalion or smaller organization for field use.)

CONTENTS OF CHEST.

Right.

TRAY.	
Aprons, rubber _____no.	2
Bands, rubber _____no.	16
*Basins, rubber*_____no.	2
Blank book, with pencil _____no.	1
Brushes, hand, scrub _____no.	6
*Case, rubber, for gloves, etc*___no.	1
*Catheters, soft rubber, in box*__no.	3
Cots, finger, rubber_____no.	8
*Cup*_____no.	1
Envelopes for tablets _____no.	150
*Forceps, hæmostatic*_____no.	6

MEDICAL AND SURGICAL CHEST—Continued.

Right—Continued.

TRAY—continued.	
Forceps, tooth-extracting, in case—no.	3
Gloves, rubber—pairs	2
Inhaler, chloroform—no.	1
Iodoform sprinkler—no.	1
Ligatures, catgut, 3 sizes, in envelopes—envel.	25
Ligatures, silk, 3 sizes, in envelopes—envel.	20
Medicine glass—no.	1
Mortar and pestle—no.	1
Pencil, extra, for blank book—no.	1
Pins, common—pkgs.	1
Pins, safety—doz.	1
Pocket case—no.	1
Razor—no.	1
Razor strop—no.	1
Scissors—no.	1
Soap box, with soap—no.	1
Spatula—no.	1
Spoon, tea—no.	1
Syringe, bulb, or flushing bag—no.	1
Syringe, hypodermic—no.	1
Thermometers, clinical—no.	6
Tongue depressor—no.	1
Tourniquet, rubber (Esmarch's)—no.	1
Tubes, drainage, 0.6 and 1 cm., of each ½ meter, in envelope—envel.	1
Washers, rubber, extra, for cans, in catheter box—no.	16
BOTTOM.	
Acidum, carbolicum, cryst—can.	1
Bismuthi subgallas, pulv—can.	1
Bismuthi subnitras, pulv—can.	1
Chloroformum—botts.	3
Glycyrrhizæ mistura comp. (tablets)—can.	1
Hydargyri chloridum mite cum sodii bicarb. tablets—can.	1
Antiseptic tablets—can.	1
Hypodermic tablets*—can.	1
Magnesii sulphas, cryst—can.	1
Petrolatum—cans.	2
Phenacetinum, tablets, 324-mgm—can.	1
Pil. camphoræ et opii (tablets)—can.	1
Pil. carminativæ (tablets)—can.	1
Pil. catharticæ comp. (tablets)—can.	1
Pilulæ copaibæ comp. (tablets) can.	1
Potassii bromidum, tablets, 324-mgm—can.	1
Quininæ sulphas, tablets, 200-mgm—cans.	3
Sodii salicylas, tablets, 324-mgm—can.	1
Towels—no.	6

*This can contains the following: In 15-c.c. bottles—Morphinæ sulphas and strychninæ sulphas, 1 bottle each. In 5-c. c. bottles—Apomorphinæ hydrochloras, atropinæ sulphas, cocainæ hydrochloras, digitalinum, nitroglycerinum, and quininæ hydrochlorosulphas, 1 bottle each.

Left.

TRAY.	
Ointment boxes, in nests of 3, nests	8
Plaster, rubber, adhesive—spools	3
Sinapis emplastrum, in 4-meter tins—tin	1
Soap, germicidal—cakes	2
Sponges, cotton, compressed, 4 doz. in box—box	1
BOTTOM.	
Bandages, gauze, 3 sizes, assorted—no.	60
Bandages, plaster of paris 2-inch—no.	6
Cotton, absorbent, in 1-oz. packages—pkgs.	16
Gauze, iodoform—pkgs.	12
Gauze, sublimated—pkgs.	24

Some of the dressings are packed in the tray.

Twenty enameled or lacquered tin cans, three chloroform bottles.
(Cans and chloroform bottles are not expendable.)

Cover, canvas, for chest—no. 1

258. CONTENTS OF COMPACT OPERATING CASE.

This case has been issued with many of the U. S. A. Medical and Surgical Chests for Detached Service. It will not be issued to medical officers already provided with the Surgeon's Field Case.

Bistoury, curved, sharp-pointed	no. 1	*Needle holder (Mathieu's)*	no. 1
Bistoury, curved, probe-pointed	no. 1	*Probe, silver*	no. 1
Catlin, medium	no. 1	*Saw, metacarpal*	no. 1
Director, grooved, with myrtle leaf	no. 1	*Saw (Satterlee's)*	no. 1
Forceps, bone (Liston's)	no. 1	*Scalpels*	no. 2
Forceps, hæmostatic (Pean's)	no. 2	*Scissors, straight*	no. 1
Forceps, hæmostatic (Tait's)	no. 2	*Scissors, curved*	no. 1
Knife, amputating, medium	no. 1	*Tenaculum*	no. 1
Knife, finger	no. 1	*Tenotome*	no. 1
Needles and silk.		*Tourniquet (Esmarch's)*	no. 1

259. CONTENTS OF FIELD OPERATING CASE.

Bistoury, curved, probe-pointed	no. 1	Ligature, silk	gm. 1
Bistoury, straight, sharp-pointed	no. 1	*Mallet (Forwood's)*	no. 1
Box, ligature, with 3 spools	no. 1	*Needle, aneurism*	no. 1
Buttons, Murphy's, 3 in set	set. 1	*Needle, curved (Reverdin's)*	no. 1
Case, mahogany	no. 1	*Needle holder (McBurney's)*	no. 1
Cannula, silver (Belocques's)	no. 1	*Needles, artery, blunt, right and left*	no. 2
Catheters, silver, Nos. 8 and 10	no. 2	*Needles, case for*	no. 1
Catheter staff, tunneled (Gouley's)	no. 1	Needles, curved, assorted	no. 12
Catlin, medium, 5-inch blade	no. 1	Needles, straight, round	no. 6
Chisel	no. 1	Needles, straight, triangular	no. 6
Clamps, intestinal (McLaurens's)	no. 2	*Periosteotome, light (Sayre's)*	no. 1
Depressor, tongue, wire, folding	no. 1	*Pins, latest (Wyeth's)*	no. 2
Director, grooved, medium	no. 1	*Pouch, leather, with sling strap*	no. 1
Drills, bone, in handle, set of 3	set. 1	*Probe, double-end, 8-inch long, one end a porcelain tip, silver*	no. 1
Ear hook and spoon (Gross's)	no. 1	*Probe, hard rubber (Fluhrer's)*	no. 1
Eye spud (Dix's)	no. 1	*Razor, hard-rubber handle*	no. 1
Forceps, bone-cutting, flat blade (Liston's)	no. 1	*Retractors, double-ends, nested*	no. 2
Forceps, clamp (Keen's)	no. 1	*Rongeur, medium (Keen's)*	no. 1
Forceps, clamp (Kelley's)	no. 1	*Saw, amputating, 2 blades (Little's)*	no. 1
Forceps, delicate	no. 1	*Saw, metacarpal*	no. 1
Forceps, dressing and bullet (Forwood's)	no. 1	*Scalpels, assorted*	no. 4
Forceps, hæmostatic, curved	no. 3	*Scissors, angular, blunt-pointed*	no. 1
Forceps, hæmostatic (Jones's), 2-inch bite	no. 1	*Scissors, curved on flat (Wyeth's)*	no. 1
Forceps, hæmostatic (Penn's)	no. 3	*Scissors, heavy, blunt*	no. 1
Forceps, hæmostatic (Wyeth's)	no. 1	*Scoop (Wyeth's)*	no. 1
Forceps, rongeur and bone-holding (Forwood's)	no. 1	Silkworm gut	coil. 1
Forceps, mouse-tooth, with teeth	no. 2	*Sponge holders, 1 Simms's and 1 regular*	no. 2
Forceps, T-shaped (Pratt's)	no. 1	*Syringe, aspirating, with three points*	no. 1
Gag, mouth (French's)	no. 1	*Tenaculum*	no. 1
Gouge	no. 1	*Trephine ½-inch (Gall's)*	no. 1
Guide, filiform (Gouley's)	no. 1	*Trocar and cannula, set of 4, silver, in metal box*	no. 1
Horse hair	coil. 1	*Tube, tracheotomy, silver*	no. 1
Knife, amputating, large, 7-inch blade	no. 1		

260. FIELD CASE. (SURGEON'S.)

(One for each Medical Officer.)

Bistoury, carved, probe-pointed—no.	1
Bistoury, straight, sharp-pointed—no.	1
Case, mahogany—no.	1
Catheter, male, plated—no.	1
Director, grooved, with myrtle leaf—no.	1
Forceps, bone, open box joint, corrugated handles, scooped out—no.	1
Forceps, bullet and dressing, combined—no.	1
Forceps, dissecting, mouse-tooth—no.	1
Forceps, hæmostatic—no.	2
Forceps, hæmostatic and needle—no.	1
Handles, hard-rubber, for knife and saw—no.	2
Horse hair, black—coil.	1
Knife, amputating—no.	1
Needle, aneurism—no.	1
Needles—doz.	1
Pouch, leather, with sling strap—no.	1
Probe, silver, with Nelaton's tip—no.	1
Saw, amputating, lifting back—no.	1
Saw, metacarpal—no.	1
Scalpel—no.	1
Scissors, curved on flat, with Collin's lock—no.	1
Scissors, light knee bent, with Collin's lock—no.	1
Silk—cards.	2
Silkworm gut (20 strands)—coil.	1
Tenaculum—no.	1

261. CONTENTS OF FIELD DESK, PATTERN OF 1900.

BOOKS.	
Army regulations—copy.	1
Drill regulations for the Hospital Corps—copy.	1
Handbook for the Hospital Corps (Smart)—copy.	1
Hygiene (Notter and Firth)—copy.	1
Information slip book—copy.	1
Information slip book, desertions—copy.	1
Manual for the Medical Department—copy.	1
Medicine, Practice of (Osler)—copy.	1
Modern Surgery (Roberts)—copy.	1
Morning report, Hospital Corps, copy.	1
Morning report, sick and wounded—copy.	1
Order and letter book—copy.	1
Register and prescription book, copy.	1
Therapeutics (Hare)—copy.	1
Transfer book—copy.	1
Tropical diseases (Manson)—copy.	1
Wounds in war (Stephenson)—copy.	1
STATIONERY.	
Book, blank, 8vo—no.	1
Elastic bands, assorted—gross	1/2
Envelopes, official, large—no.	25
Envelopes, official, letter—no.	100
Envelopes, official, note—no.	50
Eraser, steel—no.	1
Ink, black—botts.	2
Ink, red—botts.	1
Inkstands—no.	2
Mailing tubes—no.	4
Pads, letter—no.	2
Pads, prescription—no.	4
Paper, blotting—pieces.	4
Paper fasteners—no.	25
Paper, writing, legal cap—qrs.	2
Paper, writing, letter—qrs.	4
Paper, writing, note—qrs.	2
Pencils, lead—no.	4
Pens, steel—no.	12
Penholders—no.	2
Rubber—piece.	1
Ruler—no.	1
BLANKS, MEDICAL DEPARTMENT.	
Examination of recruits, monthly report—no.	6
Hospital-fund statement—no.	6
Medical property, return of—no.	2
Medical supplies, invoice of, single sheet—no.	12
Medical supplies, receipt for, single sheet—no.	12
Medical supplies, special requisition for—no.	8
Report of sick and wounded—no.	25
Report of completed cases—no.	25
Return of personnel, etc., Hospital Corps—no.	6
SUBSISTENCE DEPARTMENT.	
Ration returns—no.	15
ORDNANCE DEPARTMENT.	
Invoices—no.	3
Quarterly statements—no.	3
Receipts—no.	3

CONTENTS OF FIELD DESK, PATTERN OF 1900—Continued.

ADJUTANT GENERAL'S DEPARTMENT.	
Certificates of disability ____ no.	12
Descriptive lists ____ no.	12
Discharges ____ no.	12
Final statements ____ no.	12
Furloughs ____ no.	8
Inventory of effects of deceased soldiers ____ no.	12
Muster rolls ____ no.	12
Outline-figure cards ____ no.	24
Pay rolls ____ no.	12
Physical examination of recruits, form of ____ no.	12
Surgeon's certificate of disability, for officers ____ no.	6

262. CONTENTS OF FIELD DESK, OLD PATTERN.

Books.	
Army Regulations ____ copy.	1
Drill Regulations for the Hospital Corps ____ copy.	1
Handbook for the Hospital Corps, Smart ____ copy.	1
Information slip book ____ copy.	1
Information slip book, desertions ____ copy.	1
Manual for the Medical Department ____ copy.	1
Morning Report, Hospital Corps ____ copy.	1
Morning Report, sick and wounded ____ copy.	1
Order and letter book ____ copy.	1
Register and prescription book ____ copy.	1
Transfer book ____ copy.	1

Stationery.	
Book, blank, 8mo ____ no.	1
Elastic bands, assorted ____ gross.	½
Envelopes, official, large ____ no.	12
Envelopes, official, letter ____ no.	50
Envelopes, official, note ____ no.	25
Eraser, steel ____ no.	1
Ink, black ____ botts.	2
Ink, red ____ botts.	1
Inkstands ____ no.	2
Mailing tubes ____ no.	4
Pad, letter ____ no.	1
Pads, prescription ____ no.	4
Paper, blotting ____ pieces.	4
Paper fasteners ____ no.	12
Paper, writing, legal cap ____ qr.	1
Paper, writing, letter ____ qrs.	2
Paper, writing, note ____ qr.	1
Pencils, lead ____ no.	4
Pens, steel ____ no.	12
Penholders ____ no.	2
Rubber ____ piece.	1
Ruler ____ no.	1

Blanks.	
MEDICAL DEPARTMENT.	
Examination of recruits, monthly report ____ no.	4
Hospital-fund statement ____ no.	4
Medical property, return of ____ no.	2
Medical supplies, invoice of, single sheet ____ no.	6
Medical supplies, receipt for, single sheet ____ no.	6
Medical supplies, special requisition for ____ no.	8
Report of sick and wounded ____ no.	12
Report of completed cases ____ no.	12
Return of personnel, etc., H. C ____ no.	6
SUBSISTENCE DEPARTMENT.	
Ration returns ____ no.	12
ORDNANCE DEPARTMENT.	
Invoices ____ no.	2
Quarterly statements ____ no.	2
Receipts ____ no.	2
ADJUTANT-GENERAL'S DEPARTMENT.	
Certificates of disability ____ no.	2
Descriptive lists ____ no.	2
Discharges ____ no.	2
Final statements ____ no.	4
Furloughs ____ no.	2
Inventory of effects of deceased soldiers ____ no.	2
Muster rolls ____ no.	8
Outline-figure cards ____ no.	6
Pay rolls ____ no.	12
Physical examination of recruits, form for ____ no.	6
Surgeon's certificate of disability for officers ____ no.	2

263. CONTENTS OF MESS CHEST, SMALL.

Outfitted for 25 patients and containing the following articles:

Batter whip and mixer	no.	1	Opener, can	no.	1
Bowls, extra	no.	4	*Pitcher, agate, serving, large*	no.	1
Bowls, soup and coffee	no.	25	*Pitcher, agate, serving, small*	no.	1
Box, covered, soap	no.	1	*Platters, meat*	no.	4
Box, covered, match safe and	no.	1	*Plates, deep, agate*	no.	25
Bread board	no.	1	*Plates, extra bread*	no.	4
Chopper, meat and vegetable	no.	1	*Potato masher*	no.	1
Cleaver, butcher	no.	1	Rope, 6 cm	coil	1
Corkscrew and opener	no.	1	*Salt and pepper dredges*	no.	6
Cutter, rotary biscuit	no.	1	*Saucers, deep*	no.	25
Dipper	no.	1	*Saucers, extra*	no.	4
Dishes, agate, vegetable	no.	4	*Spoons, plated, steel*	no.	25
Egg whisk, patent	no.	1	*Spoons, serving*	no.	4
Forks, plated, steel	no.	25	*Spice box and grater, can*	no.	1
Forks, serving	no.	2	*Squeezer, patent lemon*	no.	1
Hatchet, claw	no.	1	*Steel, butcher's*	no.	1
Knife, butcher, large	no.	1	*Tea steeper*	no.	1
Knife and saw, combination	no.	1	*Tea strainer*	no.	1
Knives, plated, steel	no.	25	Towels, dish	no.	4
Ladle, soup, for serving	no.	1	*Trays, serving*	no.	4
Lantern, brass	no.	1	*Turner, cake, medium size*	no.	1
Mill, coffee, large	no.	1	Wire, annealed	coil	1
Nutmeg grater, patent	no.	1	*Wire cutter and pliers*	no.	1
Nails, assorted	box	1	*Wire pot cleaner and scraper*	no.	1

264. CONTENTS OF MESS CHEST, LARGE.

For each brigade section of a division hospital, outfitted for 100 men, and containing the following articles:

Batter whip and mixer	no.	1	*Saucers, extra*	no.	6
Biscuit cutter, patent rotary	no.	1	*Spice box and grater cans*	no.	6
Board, bread	no.	1	*Spoons, triple-plated*	no.	100
Bowls, extra deep, soup and coffee	no.	100	*Egg whisk, patent*	no.	1
Bowls, extra	no.	6	*Forks, triple-plated, steel*	no.	100
Can opener	no.	1	*Hatchet, extra fine grade, claw*	no.	1
Chopper, large, "enterprise," meat and vegetable	no.	1	*Knife, butcher*	no.	1
Cleaner and scraper, pot (wire)	no.	1	*Knife and saw, combination*	no.	1
Cleaver, large, butcher's	no.	1	*Knives, triple-plated, steel*	no.	100
Corkscrew and opener	no.	1	*Ladle, soup, for serving*	no.	1
Dipper	no.	1	*Lantern, brass*	no.	1
Dishes, agate, vegetable and pudding	no.	6	*Match safe and box, covered*	no.	1
Nutmeg grater, patent	no.	1	*Mill, coffee, large, steel*	no.	1
Pitcher, large, agate, serving	no.	1	Nails, assorted, box	no.	1
Pitcher, small, agate, serving	no.	1	*Spoons, serving*	no.	6
Platters, large, meat	no.	6	*Squeezer, lemon, patent*	no.	1
Plates, extra, dinner, bread	no.	6	*Steel, large, butcher's*	no.	1
Plates, deep, agate	no.	100	*Soap box, covered*	no.	1
Potato masher	no.	1	*Tea steeper*	no.	1
Rope, 6 cm	coil	1	*Tea strainer*	no.	1
Salt and pepper dredges	no.	6	*Trays, large, serving*	no.	6
Saucers, extra deep	no.	100	Towels, dish	no.	6
			Turner, cake, medium size	no.	1
			Wire, large, annealed	coil	1
			Wire cutter and pliers	no.	1

Field ranges and contained cooking utensils, devised for a brigade section of a division hospital (100 men), and for a regimental, post, or detached hospital (25 men), will be issued in connection with the mess chests detailed above.

265. CONTENTS OF FOOD CHEST.

Arrowroot, powdered ..... lbs.	4½	Malted milk, in bulk ..... lbs.	15
Beef extract, liquid ..... c. c.	2,400	Nutmeg, whole ..... oz.	3
Candles ..... no.	30	Rolled oats (or equivalent preparation) ..... lbs.	14
Chocolate, sugared, hard, in foil-covered cakes ..... lbs.	4½	Sugar, granulated ..... lbs.	25
Cinnamon, ground ..... oz.	3	Tea, green or black ..... lb.	1
Condensed milk, in commercial tins ..... lbs.	18		

One-fourth the space in this chest is left vacant to allow a certain latitude to each medical officer as to the exact character of the supplies to be carried and to permit of the addition of such supplementary articles as may be desired.

266. CONTENTS OF COMMODE CHEST.

Bedpan, agate ware ..... no.	1	*Spit cup, agate ware* ..... no.	1
Chamber pot, agate ware ..... no.	1	*Urinal, agate ware* ..... no.	1
Paper, toilet ..... pkgs.	6		

267. FOLDING FIELD FURNITURE.

Chairs ..... no.	2	*Stools* ..... no.	2
Chest as container ..... no.	1	*Tables with shelves and interlocking arrangement* ..... no.	2
Cots ..... no.	6		
Mosquito-bar frames ..... no.	3		

268. HOSPITAL CORPS POUCH.

(One for each private of the Hospital Corps.)

(See paragraph 243.)

269. ORDERLY POUCH.

(One for each Medical Officer's Orderly.)

(See paragraph 244.)

270. FOR DIVISION AMBULANCE TRAIN.

*Chest, surgical** ..... no.	1	*Lanterns* ..... no.	3
*Chest, sterilizer** ..... no.	1	*Litters* ..... no.	20
Buckets, agate, 3 in nest ..... nest.	1	*Litter slings*, as required ..... no.	-------
Filter, Maignen ..... no.	1	*Hospital Corps pouches*, as required ..... no.	-------
Hatchet ..... no.	1	*Orderly pouches*, as required ..... no.	-------
Lantern glasses, extra, red or white, as required ..... no.	-------	Surgical dressings† ..... box.	1
Lantern wicks, as required ..... no.	-------		

*Pattern of 1900. Surgical chests Nos. 1 and 2 and sterilizer chest, pattern of 1898, may be issued instead of these chests.

†Issued only with surgical and sterilizer chests, pattern of 1900.

271. ISSUED BY THE QUARTERMASTER'S DEPARTMENT.

(See paragraph 246.)

272. ISSUED BY THE ORDNANCE DEPARTMENT.

(See paragraph 247.)

There are at many military posts cases of instruments, etc., once borne on the official supply table, but now dropped as obsolete or superseded by improved articles. The contents of these cases are given below for the use of officers responsible for such property.

273. CONTENTS OF CAPITAL OPERATING CASES.

CASE NO. 1.

(In mahogany case, with leather pouch.)

Catlin, long	no. 1	*Needle, aneurism, handle, and 3 tips*	no. 1
Catlin, small	no. 1	*Needle, key, artery*	no. 1
Chisel	no. 1	Needles, surgeon's	no. 12
Drills, with one handle	no. 4	*Retractors*	no. 2
Elevator and raspatory combined	no. 1	*Saw, bow, 2 blades*	no. 1
Forceps, artery, fenestrated, spring catch	no. 1	*Saw, chain*	no. 1
Forceps, bone, gouge	no. 1	*Saw (Hey's)*	no. 1
Forceps, bone, long, slightly bent	no. 1	*Saw, metacarpal*	no. 1
Forceps, bone, long, angled	no. 1	*Scalpels*	no. 3
Forceps, sequestrum	no. 1	*Scissors, straight*	no. 1
Gouge	no. 1	*Tenaculum*	no. 1
Hook, double	no. 1	*Tourniquet, screw*	no. 1
Knife, amputating, long	no. 1	*Trephine, brush for*	no. 1
Knife, amputating, medium	no. 1	*Trephine, conical*	no. 1
Knife, cartilage	no. 1	*Trephine, crown*	no. 1
Ligature, silk	gms. 5	*Trephine, handle for*	no. 1
Mallet, leaden	no. 1	Wax	piece. 1

CASE NO. 2.

(In mahogany case, with leather pouch.)

Bistoury, straight	no. 1	*Needle, key, artery*	no. 1
Catlin, long	no. 1	Needles, surgeon's	no. 12
Catlin, small	no. 1	*Raspatory*	no. 1
Chisel	no. 1	*Razor*	no. 1
Drills, with one handle	no. 4	*Retractors*	no. 2
Elevator	no. 1	*Saw, bow, 2 blades*	no. 1
Forceps, artery, bulbous, slide catch	no. 1	*Saw, chain*	no. 1
Forceps, bone, gouge, curved	no. 1	*Saw (Hey's)*	no. 1
Forceps, bone, gouge, straight	no. 1	*Saw, movable back*	no. 1
Forceps, bone, long	no. 1	*Scalpels*	no. 3
Forceps, lithotomy	no. 1	*Scissors, straight*	no. 1
Forceps, sequestrum	no. 1	*Tenaculum*	no. 2
Gouge	no. 1	*Tourniquet, screw, with pad*	no. 1
Knife, amputating, long	no. 1	*Trephine, brush for*	no. 1
Knife, amputating, medium	no. 1	*Trephine, conical*	no. 2
Knife, cartilage	no. 1	*Trephine, handle for*	no. 1
Ligature, silk	gms. 5	*Trocar and cannula, straight*	no. 1
Needle, aneurism, handle and 3 tips	no. 1	Wax	piece. 1

274. CONTENTS OF GENERAL OPERATING CASE.

This set consists of two mahogany boxes with locks and keys, carried in a leather or heavy gutta-percha pouch, and containing the following:

Box No. 1.			
Bistoury, curved	no.	1	
Bistoury, curved, probe-pointed	no.	1	
Bistoury, straight	no.	1	
Callin	no.	1	
Forceps, bullet	no.	1	
Forceps, dissecting	no.	1	
Forceps, dressing, curved	no.	1	
Forceps, œsophageal	no.	1	
Hook, double	no.	1	
Knife, amputating, small	no.	1	
Knife, hernia	no.	1	
Needle, aneurism, handle and 4 tips	no.	1	
Needle, cataract	no.		1
Needle, key, artery	no.		1
Needles, surgeon's	no.		12
Saw, movable back	no.		1
Scissors, curved	no.		1
Scissors, straight	no.		1
Scalpels	no.		3
Tenaculum	no.		1
Tourniquet, field	no.		1
Trocar and cannula, straight	no.		1
Box No. 2.			
Catheters, metallic	no.		3
Sounds, metallic, double-curve	no.		6

(a) CONTENTS OF AMPUTATING CASE.

(In mahogany case.)

Callin, long	no.	1	
Callin, small	no.	1	
Forceps, artery, spring-catch	no.	1	
Forceps, bone (nippers)	no.	1	
Knife, amputating, long	no.	1	
Knife, amputating, medium	no.	1	
Knife, amputating, small	no.	1	
Ligature, silk	gms.	2	
Needle, aneurism	no.		1
Needles, surgeon's	no.		12
Saw, bow, two blades	no.		1
Saw, metacarpal	no.		1
Scalpel	no.		1
Tenaculum	no.		1
Tourniquet, screw, with pad	no.		1
Wax	piece		1

(b) CONTENTS OF EXSECTING CASE.

(In mahogany case, with gutta-percha cover.)

Chisel	no.	1	
Ecraseur, chain	no.	1	
Forceps, bone, gouge	no.	2	
Forceps, bone, long	no.	1	
Forceps, sequestrum	no.	1	
Gouge	no.		1
Knife, lenticular	no.		1
Retractors	no.		2
Saw, chain	no.		1
Trephine	no.		1

275. CONTENTS OF FIELD CASE.*

(In wooden case, with leather pouch and sling strap with buckle and snap hooks.)

Bistoury, curved	no.	1	
Catheter, silver, jointed	no.	1	
Director and aneurism needle	no.	1	
Forceps, artery and needle, combined	no.	1	
Forceps, bone	no.	1	
Forceps, bullet	no.	1	
Forceps, dressing	no.	1	
Knife, amputating, blade	no.	1	
Knife, amputating, handle	no.	1	
Ligature, silk	gms.		3
Needles, surgeon's	no.		12
Probe (Nélaton's)	no.		1
Saw blade, movable back	no.		1
Saw blade, handle	no.		1
Scalpel	no.		1
Scissors, straight	no.		1
Serrefines (Langenbeck's)	no.		4
Tenaculum	no.		1
Wax	piece		1

* This is the case issued originally as "surgeon's field case."

276. CONTENTS OF FIELD OPERATING CASE, OLD PATTERN.

(In mahogany case, with leather pouch.)

This list does not correspond to the contents of all field operating cases; discrepancies should be noted.

Bistoury, curved	no.	1	
Bistoury, curved, probe-pointed	no.	1	
Bistouries, straight	no.	2	
Catheters, silver, Nos. 3, 6, and 9	no.	3	
Catlin, long	no.	1	
Catlin, medium	no.	1	
Director	no.	1	
Elevator	no.	1	
Elevator and raspatory, combined	no.	1	
Forceps, artery, spring	no.	1	
Forceps, bone, curved	no.	1	
Forceps, bullet	no.	1	
Forceps, dissecting	no.	1	
Forceps, dressing	no.	1	
Forceps, sequestrum	no.	1	
Knife, amputating, long	no.	1	
Knife, amputating, medium	no.	1	
Knife, hernia	no.	1	
Ligature, silk	gms.	5	
Needle, aneurism, handle and 3 tips	no.	1	
Needle, key, artery	no.		1
Needles, surgeon's	no.		12
Probe, bullet, long	no.		1
Probe (Nélaton's)	no.		1
Razor	no.		1
Retractors	no.		2
Saw, bow, 2 blades	no.		1
Saw, chain	no.		1
Saw (Hey's)	no.		1
Saw, metacarpal	no.		1
Scalpel	no.		1
Scissors, angular	no.		1
Scissors, straight	no.		1
Sounds, steel, silvered, double curve, Nos. 1–2, 3–4, 5–6, 7–8, 9–10, 11–12	no.		6
Tenaculum	no.		1
Tourniquet, screw, with pad	no.		1
Trephine, brush for	no.		1
Trephine, conical, and handle	no.		1
Trocar and cannula, curved	no.		1
Wax	piece.		1

277. CONTENTS OF MINOR OPERATING CASE.

(In brass-bound mahogany case, with leather pouch.)

Bistoury, curved	no.	1	
Bistoury, curved, probe-pointed	no.	1	
Bistouries, straight	no.	2	
Cannula (Bellocq's)	no.	1	
Catheter, prostatic, silver	no.	1	
Catheters, silver, Nos. 3, 6, and 9	no.	3	
Director	no.	1	
Ecraseur, wire, two tips	no.	1	
Forceps, artery, fenestrated, slide catch	no.	1	
Forceps, bullet	no.	1	
Forceps, dissecting	no.	1	
Forceps, dressing	no.	1	
Forceps, œsophageal	no.	1	
Forceps, tracheotomy (Trousseau's)	no.	1	
Knife, amputating	no.	1	
Knife, hernia	no.	1	
Ligature, silk	gms.	5	
Needle, artery, with four tips	no.	1	
Needle, key, artery	no.	1	
Needles, surgeon's	no.	12	
Pliers, wire-cutting, small	no.		1
Probang, œsophageal	no.		1
Probe (Nélaton's)	no.		1
Probe (Sayre's), vertebrated	no.		1
Scalpels	no.		2
Scissors, angular	no.		1
Scissors, curved	no.		1
Scissors, straight	no.		1
Serrefines	no.		6
Sound, small	no.		1
Sounds, steel, silvered, double curve, Nos. 1–2, 3–4, 5–6, 7–8, 9–10, 11–12	no.		6
Staff, grooved, large	no.		1
Staff, grooved, medium	no.		1
Staff (Syme's)	no.		1
Tenaculum	no.		1
Tonsillotome	no.		1
Trocar and cannula, curved	no.		1
Tubes, tracheotomy, double	no.		2
Wax	piece.		1

278. CONTENTS OF POCKET CASE, ASEPTIC.

(In leather case, with metal clips and chamois cover.)

Bistoury, curved	no. 1	*Needle, aneurism, and grooved director*	no. 1
Bistoury, curved, probe-pointed	no. 1	*Needle, exploring*	no. 1
Bistoury, straight	no. 1	Needles, surgeon's	no. 12
Catheter, jointed, male and female tips	no. 1	*Probe (Nélaton's)*	no. 1
Caustic holder	no. 1	*Probe, silver*	no. 1
Forceps, needle and fenestrated, artery	no. 1	*Scalpel*	no. 1
Forceps, long-jawed	no. 1	*Scissors*	no. 1
Lancet, thumb	no. 1	*Tenaculum*	no. 1
Ligature, silk	gm. 1	*Tenotome*	no. 1
Needle, aneurism	no. 1	Wax	piece. 1

279. CONTENTS OF POCKET CASE, PERSONAL.

(In leather case, with leather or gutta-percha cover.)

This case was formerly part of the "personal set."

Bistoury, curved	no. 1	Ligature, silk	gm. 1
Bistoury, curved, probe-pointed	no. 1	*Needle, aneurism*	no. 1
Bistoury, straight	no. 1	*Needle, exploring*	no. 1
Catheter, jointed, male and female tips	no. 1	Needles, surgeon's	no. 9
Caustic holder	no. 1	*Probes*	no. 2
Director, grooved	no. 1	*Probes (Nélaton's)*	no. 1
Forceps, artery, fenestrated	no. 1	*Scalpel*	no. 1
Forceps, dissecting	no. 1	*Scissors*	no. 1
Forceps, dressing	no. 1	*Tenaculum*	no. 1
Lancet, thumb	no. 1	*Tenotome*	no. 1
		Wax	piece. 1

280. CONTENTS OF POCKET CASE, POST.

This name is used when reference is made to the red morocco pocket case with chamois cover issued during the past few years for post use.

The list of contents is the same as that of the aseptic pocket case, but the aneurism and exploring needles, knives, and tenaculum are detachable from the two hard-rubber or ivory handles. Some cases contain a combined needle and fenestrated artery forceps and a hæmostatic forceps; others a plain artery and a dressing forceps.

281. CONTENTS OF TREPHINING CASE.

(In small mahogany box.)

Elevator	no. 1	*Trephine, brushes for*	no. 2
Saw (Hey's)	no. 1	*Trephine, conical*	no. 1
Scalpel and raspatory	no. 1	*Trephine, handle for*	no. 1

282. CONTENTS OF EYE AND EAR CASE.

(In mahogany case, with leather pouch.)

Bottles, g. s., 4-c. c	no.	2	
Catheter, eustachian, h. r	no.	1	
Curette	no.	1	
Cystotome and scoop	no.	1	
Director, lachrymal	no.	1	
Forceps, angular, for ear	no.	1	
Forceps, cilia	no.	1	
Forceps, fixation	no.	1	
Forceps, iridectomy, angular	no.	1	
Forceps, iridectomy, curved	no.	1	
Forceps, iridectomy, straight	no.	1	
Hook, blunt	no.	1	
Hook, blunt, curved shank	no.	1	
Hook, double	no.	1	
Hook, strabismus	no.	2	
Keratome, angular	no.	2	
Knife (Beer's), cataract	no.	1	
Knife (Graefe's), linear	no.	1	
Knife, iris	no.	1	
Knife, iris, double-edge	no.	1	
Lid holder, large and small	no.	2	
Lid holder, hard rubber	no.	1	
Mirror, laryngeal	no.	2	
Mirror, laryngoscopic, with head band	no.	1	
Needle, curved	no.	1	
Needle, stop, curved	no.	1	
Needle, stop, straight	no.	1	
Needle, straight	no.	1	
Needles, fine	no.	6	
Ophthalmoscope	no.	1	
Optometer (Thompson's)	no.	1	
Probes, lachrymal, double, silver	no.	4	
Scalpel	no.	1	
Scissors, curved on the flat	no.	1	
Scissors, iris (Noyes's), on handle	no.	1	
Scissors, strabismus	no.	1	
Scissors, straight	no.	1	
Scoop and hook, metal handle	no.	1	
Silk, fine	gm.	1	
Speculums, ear, in nest	no.	3	
Speculum, eye, stop	no.	1	
Speculum, eye, stop (Graefe's)	no.	1	
Spoon, lens., h. r	no.	1	
Spoon, lens, fenestrated	no.	1	
Spud, Dix's	no.	1	
Styles, lachrymal, silver	no.	2	
Syringe (Anel's), with 3 tips	no.	1	
Wax	piece.	1	

283. CONTENTS OF CASE OF TRIAL LENSES.

QUEEN.

(In mahogany case, with lock and key.)

Twenty pairs spherical convex lenses.
Twenty pairs spherical concave lenses, both from 2 to 48 inches focus.
Eight cylindrical convex lenses.
Eight cylindrical concave lenses, both from 9 to 72 inches focus.
Five prisms, 2°, 3°, 4°, 5°, 8°.
Three metal discs, one plain, one with hole in center, and one with stenopaic slit.
Four colored glasses—red, blue, green, and brown.
One single lens holder.
One trial frame.

284. CONTENTS OF GENITO-URETHRAL CASE.

(In rosewood case.)

Bougies à boule (Otis's), metal, nickel-plated, Nos. 11, 14, 17, 21, 26, 30	no.	6	
Catheter, double current, silver	no.	1	
Catheter, grooved and tunneled (Gouley's), with stylet	no.	1	
Catheter and staff, grooved and tunneled (Gouley's), with stylet	no.	1	
Crin de Florence	no.	1	
Dilator (Thompson's), modified by Gouley	no.	1	
Director, silver (Gouley's)	no.	1	
Forceps, urethral (Thompson's)	no.	1	
Gauge, steel (American and French)	no.	1	
Gauges, pasteboard (American and French)	no.	2	
Guides, whalebone (Gouley's)	no.	12	
Guides, whalebone (Otis's)	no.	2	
Knife, beaked (Gouley's)	no.	1	
Sounds, set of 4, fitting one handle	no.	1	
Sounds, tunneled (Gouley's)	no.	3	
Tenaculum (Gouley's)	no.	1	
Urethrotome, dilating (Gouley's), with two tunnel tips	no.	1	

285. CONTENTS OF GENITO-URINARY CASE, OLD PATTERN.

(In mahogany case.)

Bistoury for meatus (Otis's)—no.	1	*Urethrometer (Otis's), hinged*—no.	1
Bougies à boule (Otis's), metal, nickel-plated, Nos. 8 to 40, inclusive—no.	33	Urethrometer, rubber covers for—no.	12
Endoscopes (Otis's, h. r.), Nos. 22, 26, and 32—no.	3	*Urethrotome, Maisonneuve's, No. 8, Otis's gauge, with two blades, two filiform bougies and one extra tunneled tip for whalebone guide*—no.	1
Gauge (Otis's) steel—no.	1	*Urethrotome, dilating (Otis's), straight, with two blades*—no.	1
Guides (Otis's), whalebone—no.	2		
Sounds (Otis's), short-beaked, steel, nickel-plated, Nos. 20 to 40, inclusive—no.	21		

286. CONTENTS OF URETHRAL CASE.

(In rosewood case, with lock.)

But few of these have been issued. It is essentially the same as the genito-urinary case, but the arrangement and contents are somewhat different.

Bougies à boule (Otis's), metal, nickel-plated, Nos. 8 to 46, inclusive—no.	39	*Urethrometer (Otis's), spring*—no.	1
Catheter syringe, prostatic—no.	1	Urethrometer, rubber covers for—no.	12
Gauge, steel—no.	1	*Urethrotome, dilating (Otis's), straight, with two blades*—no.	1
Sounds (Otis's), short-beaked, steel, nickel-plated, Nos. 21 to 46, inclusive—no.	26		

287. CONTENTS OF OBSTETRICAL AND GYNECOLOGICAL CASE.

(In leather trunk case, with handles and lock.)

Blunt hook and crotchet, guarded—no.	1	*Probe, uterine, silver, with silver applicator, set-screw handle, and sponge tent expeller*—no.	1
Bottle, g. s. and g. c., for Little's saline mixture—no.	1	*Scarifier (Buttles's)*—no.	1
Bottle, g. s. and g. c., for styptic—no.	1	*Scissors, uterine, curved on the flat*—no.	1
Bottle, g. s. and g. c., for ergot—no.	1	*Sound, folding (Simpson's)*—no.	1
Catheter (Sims's) sigmoid, metal—no.	1	*Speculum, vaginal and anal, combined*—no.	1
Cephalotribe (craniotomy forceps)—no.	1	*Suppository tube, intra-uterine, h. r*—no.	1
Dilators (Barnes's), with stop-cocks, etc—no.	3	*Syringe, rubber, self-injecting*—no.	1
Dilator, uterine, small—no.	1	*Tampon, small*—no.	1
Elevator, uterine (Sims's) with two points—no.	1	*Tenaculum (Nott's)*—no.	1
Forceps, long (Wallace's)—no.	1	*Transfusion set (Fryer's)**—no.	1
Forceps, placenta (Loomis's)—no.	1	*Vectis, with handle*—no.	1
Forceps, short (Brickell's)—no.	1		
Funis clamp (Pulling's)—no.	1		
Perforator (Thomas's)—no.	1		

*With directions for use, and consisting of a rubber tube with two bulbs, a glass receiver, and giver's and receiver's cannulæ.

288. CONTENTS OF STOMACH-PUMP CASE.

(In mahogany case, with lock and key.)

Foot, metal	1	*Pipes, injecting, ivory, straight*	2
Gag, mouth	1	*Pipe guard, rectal*	1
Gag, screw	1	*Pump, brass, with lever*	1
Hose, filling and ejecting	1	*Tube, rectal (O'Beirne's)*	1
Pipe, injecting, ivory, angular	1	*Tube, stomach*	1

289. SURGICAL PUMP.

(In leather bag, with lock and key, and directions for use. Those heretofore issued are of two or three different patterns, and do not exactly correspond to this list.)

Allen's Surgical Pump, No. 12, will in future be supplied only in Medical Chest No. 2, pattern 1898; it consists of the following outfit:

Bottles, g. s	2	Dilator, uterine, silk covers for	4
Bottles (vials)	2	*Needles, aspirating*	4
Catheter and connector	1	*Pipe, breast, nipple (glass)*	1
Clamp attachment	1	*Pipes, syringe (ear, postnasal, vaginal, rectal, and uterine*	5
Cock, two-way, rubber, for injecting	1	*Pump, 9 cm. and tube*	1
Connector tube	1	Pump, extra tube for	1
Connectors with cut-offs	3	*Tampons*	2
Couplings, "Universal"	2	Tampons, extra bags for	4
Cupper, uterine, metal	1	*Trocar, dome*	1
Cupper, glasses	5	*Tube, stomach and connector*	1
Dilator, uterine, large	1		
Dilator, uterine, small	1		

290. CONTENTS OF DISSECTING CASE.

(In wooden case.)

Blowpipe	1	*Knife, cartilage*	1
Chain and hooks	1	Needles (and thread)	2
Chisel	1	*Scalpels, assorted*	3
Enterotome	1	*Scissors, straight*	1
Forceps, dissecting	1	*Tenaculum*	1

291. MICROSCOPES.

THE "UNIVERSAL" MICROSCOPE.

Made by the Bausch & Lomb Optical Company. In two cases, the contents of which are as follows:

Microscope Case. (In upright cherry-wood case, with handle, lock, and extra hook and post fastenings.)			
Stand, "Universal"	1	*Eyepiece micrometer*	1
Glass stage and slide carrier	1	*Concave and plain mirror*	1
Eyepieces, A and C	2	*Objective, 2-inch*	1
		Objective, ⅔-inch	1
		Objective, ⅙-inch	1
		Objective, 1/12-inch	1
		Abbe condenser with iris diaphragm	1
		Double nosepiece	1

MICROSCOPES—Continued.

Microscope Case—Continued.	
Iris diaphragm, with substage adapter, arranged to take diaphram or objective ——no.	1
Revolving diaphragm——no.	1
Bull's-eye condenser——no.	1
Stage forceps——no.	1
Camera lucida——no.	1
Forceps——no.	1
Glass covers——no.	6
Glass slides——no.	6
Case of Microscopical Accessories.	
(In cherry-wood case, with handle, lock, and extra hook and post fastenings.)	
Microtome——no.	1
Knife for same, one side flat, in case——no.	1
Syringe, brass, with four pipes and stopcock, in case——no.	1
Turntable, self-centering——no.	1
Glass slides——doz.	4
Glass covers——gms.	30
Carmine——gms.	15
Canada balsam——gms.	30
Balsam bottle——no.	1
Dropping bottle, for oil of cedar—no.	1
Gentian violet——gms.	4
Bismarck brown——gms.	4
Methyl blue——gms.	4
Fuchsin——gms.	4
Aniline oil——c. c.	60
Paraffin——kilo.	¼

NOTES.

Eyepiece A, 2-inch objective gives about 25 diam.
Eyepiece A, ¾-inch objective gives about 50 diam.
Eyepiece A, ⅛-inch objective gives about 210 diam.
Eyepiece A, 1/12-inch objective gives about 570 diam.
Eyepiece C, 2-inch objective gives about 50 diam.
Eyepiece C, ¾-inch objective gives about 100 diam.
Eyepiece C, ⅛-inch objective gives about 420 diam.
Eyepiece C, 1/12-inch objective gives about 1140 diam.

THE "INVESTIGATOR" MICROSCOPE.

Made by the Bausch & Lomb Optical Company, and of which many have been issued, consists of the following:

Microscope Case.	Case of Microscopical Accessories.	
The contents of this case are the same as those of the Universal microscope, the stand alone being of a slightly different pattern.	*Section cutter, with freezing apparatus*——no.	1
	Razor, large, one side flat, with handle, in case——no.	1
	Syringe, 15-c. c., brass, with four pipes and stopcock, in case—no.	1
	Turntable, self-centering——no.	1
	Glass covers——gms.	30
	Glass slides——doz.	4
	Carmine——gms.	15
	Canada balsam——gms.	30
In cases, etc., as above.	*Balsam bottle*——no.	1
	Dropping bottle, for cedar oil—no.	1

292. CHEMICAL SET.

Chemicals.	
Acid, arsenous As_2O_3 ---- gms	50
Acid, oxalic, $H_2C_2O_4 2H_2O$ --- gms	100
Alcohol, ethylic, abs. C_2H_5OH gms	100
Ammonium molybdate $(NH_4)_2MoO_4$ ---- gms	50
Anilin $C_6H_5NH_2$ ---- gms	50
Barium chlorid, $BaCl^2 2H_2O$ gms	50
Calcium carbonate, $CaCo_3$ --- gms	50
Calcium chlorid, $CaCl_2$ ---- gms	50
Ferrous sulfid FeS ---- gms	100
Potassium dichromate, $K_2Cr_2O_7$ gms	100
Potassium cyanid, KCN ---- gms	50
Potassium ferricyanid, $K_6Fe(CN)_{12}$ ---- gms	25
Potassium ferrocyanid, $K^4Fe(CN)_6 3H_2O$ ---- gms	25
Potassium hydrate, KOH --- gms	200
Potassium sulphocyanate, KSCN gms	50
Sodium phosphate, dry, Na_2HPO_4 gms	50
Sodium hydrate, NaOH ---- gms	200
Sodium thiosulphate, $Na_2S_2O_3 5H_2O$ ---- gms	100
Stannous chlorid, $SnCl_2 2H_2O$ gms	50
Uranic nitrate, $UO_2(NO_3)_2 6H_2O$ gms	50
Methyl orange, $NH_4C_{14}H_{14}N_3SO_3$ gms	10
Naphthylamine, $C_{10}H_7NH_2$ gms	5
Phenolphthalein, $C_{20}H_{14}O_4$ --- gms	10

Apparatus.	
Beakers, 100–200 c. c ---- no	6
Bottles, g. s. n. m. 50, 100, 200 c. c. no	24
Burettes ---- no	2
Burette clips ---- no	4
Capsules, porcelain, nest of six nest	1
Capsules, porcelain, 100-c. c --- no	6
Capsules, porcelain, 250-c. c --- no	3
Corks, india rubber, perforated doz	1
Crucibles, porcelain, conical --- no	4
Filters, cut, white (in packs of 100) ---- pkgs	3
Flasks, flat-bottomed, with lip --- no	6
Flasks, round-bottomed, long neck no	2
Flasks, Schuster's, stoppered --- no	6
Forceps, small ---- no	1
Funnel tubes ---- no	2
Funnels, glass ---- no	2
Glasses, Nessler, 50-c. c ---- no	6
Pipe, block tin, 9-mm., for condensing distilled water ---- meters	6
Pipettes, 10-c. c ---- no	2
Pipette, 25-c. c ---- no	1
Pipette, 10-c. c., graduated ---- no	1
Platinum, crucible, 30-c. c ---- no	1
Retorts, 1-liter, stoppered ---- no	2
Rods, glass ---- no	12
Spatulas or spoons, porcelain --- no	2
Still, copper, 2-liter ---- no	1
Stopcocks for rubber tubing --- no	2
Test glasses, footed ---- no	12
Tubes, Ca Cl ---- no	2
Tubes, U ---- no	3
Wash bottle ---- no	1
Watch glasses ---- no	6
Water bath for drying ---- no	1

Miscellaneous.	
Aluminium foil ---- gms	15
Copper foil ---- gms	25
Glass, blue ---- sq. cms	9
Iron wire ---- gms	50
Platinum foil ---- sq. cms	20
Wire gauze ---- sq. cms	50
Zinc foil ---- sq. cms	20
Zinc, granulated ---- gms	100

293. CONTENTS OF MEDICAL CHEST, U. S. ARMY, No. 1.

A list of contents is stamped on morocco pad, which is carried, reversed, under the cover of chest.

Contents of Tray.	
LEFT OF TRAY.	
Tablets in 120-c. c. bottles.	
Acetanilidum ---- mgms	200
Camphora et opium ----	
Carminativæ ----	
Catharticæ compositæ ----	
Copaibæ compositæ ----	
Ipecacuanha et opium --- mgms	324
Linimentum rubefaciens ----	
Magnesii sulphas, in bulk (2 botts.) ----	
Mistura glycyrrhizæ comp ----	
Potassii bromidum ---- mgms	324
Quininæ sulphas (2 botts.) mgms	200

CONTENTS OF MEDICAL CHEST—Continued.

Contents of Tray—Continued.

Sodii bicarbonas mgms.	324
Sodii bicarb. et menthæ pip	
Sodii salicylas mgms.	324

FRONT OF TRAY.
Tablets in 15-c. c. bottles.

Acidum arsenosum mgm.	1
Argenti nitras fusus gms.	15
Capsicum mgms.	32
Cupri arsenis mgm.	0. 325
Digitalis tinctura c. c.	0. 8
Ferri compositæ	
Hydrargyri iodidum flavum, mgms.	10
Ergotinum mgms.	130
Oleum tiglii c. c.	0. 006
Podophylli resina mgms.	16
Santoninum mgms.	32

And 2 empty bottles.

BACK OF TRAY.
In 235 and 475-c. c. bottles.

Alcohol bott.	1
Aqua ammoniæ bott.	1
Chloroformum botts.	2
Oleum terebinthinæ bott.	1
Spiritus frumenti bott.	1
Spiritus vini gallici botts.	2

CENTER OF TRAY.

Envelopes, small, for tablets no.	100
Graduate glass, 60-c. c no.	1
Labels for vials no.	50
Measure, graduated, 5-c. c no.	1
Ointment boxes, in nests of three, nests.	4
Pocket stove no.	1
Tumbler no.	1
Vials, 60-c. c no.	10

RIGHT OF TRAY.
Tablets in 60-c. c bottles.

Acidum boricum mgms.	324
Acidum tannicum mgms.	324
Aconiti tinctura c. c.	0. 1
Alumen mgms.	324
Ammonii chloridi trochisci	
Antipyrinum mgms.	324
Bismuthi subnitras mgms.	324
Chloral mgms.	324
Hydrarg. chl. mite cum sodio bicarb	
Hydrargyri massa mgms.	324
Ipecacuanha mgms.	65
Morphinæ sulphas mgms.	8
Opium mgms.	65
Phenacetinum mgms.	324
Plumbi acetas mgms.	130
Potassii chloras mgms.	324
Potassii iodidum mgms.	324
Salol mgms.	324
Zinci sulphas mgms.	324

And 1 empty bottle.

Contents of Drawers.

DRAWER No. 1.
Hypodermic Tablets.

Apomorphinæ hydrochloras, mgms.	9
Atropinæ sulphas mgm.	0. 65
Cocainæ hydrochloras mgms.	10
Digitalinum mgm.	1
Morphinæ sulphas mgms.	8
Nitroglycerinum mgm.	0. 65
Quininæ hydrochloras mgms.	32

And 1 empty bottle.

Ophthalmic Discs.

Atropinæ sulphas, 0.13 mgm., 50 in box box	1
Physostigminæ sulphas, 0.032 mgm., 50 in box box	1

Miscellaneous.

Caustic holder, rubber no.	1
Corkscrew, folding no.	1
Medicine droppers no.	2
Pencil, indelible no.	1
Pencil, indelible, leads for no.	6
Pencils, camel's-hair no.	12
Syringe, hypodermic no.	1
Thermometer, clinical no.	1
Tongue depressor no.	1

DRAWER No. 2.

Bandages, suspensory no.	5
Flannel, red meter.	1
Jute, or equivalent, in 100-gm. pkgs pkgs.	4
Syringe, rubber, self-injecting no.	1

DRAWER No. 3.

Book, prescription no.	1
Forceps, dressing, for removing cotton no.	1
Index of Medicine (Carpenter) copy.	1
Plaster, blistering meter.	1
Plaster, mustard meters.	4
Reagent case no.	1
Scissors no.	1
Spatula no.	1
Spoon, tea no.	1
Stethoscope, h. r no.	1
Syringes, p., h. r no.	5
Syringe, p., g., in wooden case, no.	3
Tags, diagnosis book.	1
Towels no.	2

DRAWER No. 4.

Beef extract, in 100-gm. tins tins.	5
Jute, or equivalent, 100-gm, pkgs pkgs.	6

CONTENTS OF MEDICAL CHEST—Continued.

Contents of Drawers—Cont'd.	
DRAWER NO. 5.	
Bandages, roller, assorted—no.	30
Cotton, absorbent, 100-gm. pkgs—pkgs.	4
Soap, castile—gms.	225
DRAWER NO. 6.	
Æther, in 100-gm. tins—tins.	4
Candles—no.	15
Corks, for æther cans—no.	6

DRAWER NO. 6—Continued.	
Corks, extra, for bottles—no.	6
Cupping tins—no.	4
Links, split, for pack saddle—no.	4
DRAWER NO. 7.	
Gauze, plain, 2-meter pkgs., pkgs.	4
Lint, absorbent, 100-gm. pkgs., pkgs.	4

294. CONTENTS OF SURGICAL CHEST, U. S. ARMY, No. 2.

A list of contents is stamped on morocco pad, which is carried, reversed, under the cover of the chest.

Contents of Tray.	
TABLETS IN 120-C. C. BOTTLES.	
Acidum boricum—mgms.	324
Antiseptic (2 bottles)	
Catharticæ compositæ	
Opium—mgms.	65
Potassii bromidum—mgms.	324
IN 235-GM. BOTTLES.	
Acidum carbolicum—bott.	1
Chloroformum—botts.	2
Glycerinum—bott.	1
Opii tinctura—bott.	1
Spiritus frumenti—botts.	2
Æther, in 100-gm. tins—tins.	5
Bucket, folding, canvas—no.	1
Catheters, flexible—no.	6
Corks, for æther cans—no.	6
Corks, extra, for bottles—no.	6
Dressing paper—roll.	1
Felt for splints—pieces.	2
Muslin—meters.	3
Petrolatum—kilo.	½
Pocket case, aseptic—no.	1
Razor strop—no.	1
Tumbler—no.	1

Contents of Drawers.	
DRAWER NO. 1.	
Bandages, rubber—no.	1
Brush, nail—no.	1
Gauze, plain—meters.	2
Goggles—no.	2
Iodoform sprinkler—no.	1
Ligature, catgut, sterilized, spools.	2
Ligature, silkworm gut—coil.	1
Ligature, silk—gms.	15
Needles, thread, etc., in case—case.	1
Pencil, indelible, leads for—no.	3
Pins, common—paper.	1
Pins, safety, assorted—doz.	4
Speculum for ear and nose—no.	1
Tape—piece.	1
Tape measure—no.	1
Tourniquet (Esmarch's)—no.	1
DRAWER NO. 2.	
Case, tooth-extracting—no.	1
Cotton, absorbent—pkgs.	2
Drainage tubes, rubber—meters.	3
Links, split, for pack saddle—no.	4
Plaster, adhesive, 15-mm.—spools.	4
Plaster, adhesive, 30-mm.—spool.	1
Sponges, in bags—bags.	2
Syringe, fountain—no.	1
Tags, diagnosis—book.	1
DRAWER NO. 3.	
Bandages, roller—doz.	3
Bandages, suspensory—no.	2
Beef extract, in 100-gm. tins—tins.	1
Brush, shaving—no.	1
Cotton, absorbent—pkgs.	2
Measure, graduated, 5-c. c.—no.	1
Medicine measuring glass—no.	1
Needles, sail—no.	1
Needle holder (Tiemann's)—no.	1
Needle, upholsterer's—no.	1
Pencil, indelible—no.	1
Plaster, isinglass—meters.	9
Razor—no.	1
Scissors—no.	1
Surgery, operative (Smith's)—copy.	1
Syringes, p., h. r.—no.	2
Tool, universal—no.	1

CONTENTS OF SURGICAL CHEST—Continued.

Contents of Drawers—Cont'd.	
DRAWER No. 4.	
Bandages, flannel ____ no.	4
Bandages, roller ____ doz.	1
Emergency case, complete ____ no.	1
DRAWER No. 5.	
Gauze, plain ____ meters.	4
Jute, or equivalent, 100-gm. pkgs ____ pkgs.	6
Lantern, small ____ no.	1
Soap, castile ____ gms.	225
DRAWER No. 6.	
Bandages, roller ____ no.	6
Hæmostatic forceps, in case ____ no.	12
Towels ____ no.	2
Trays, for instruments ____ no.	2

295. CONTENTS OF HÆMOSTATIC FORCEPS CASE.

(Surgical chest.)

Halstead's curved, light ____ no.	6	*Pratt's T-shaped* ____ no.	1
Halstead's curved, heavy ____ no.	2	*Senn's long-jaw, mouse-toothed* ____ no.	1
Jones's straight ____ no.	2		

296. CONTENTS OF MESS CHEST, OLD PATTERN.

Basin, wash, hand, agate ware ____ no.	1	Matches, in *waterproof case*, boxes.	12
Boiler, double, agate ware ____ no.	1	*Meat cutter, small* ____ no.	1
Bowls, soup, agate ware ____ no.	6	*Meat dishes, agate ware* ____ no.	2
Box for salt ____ no.	1	*Mill, coffee* ____ no.	1
Box for pepper ____ no.	1	Nails, assorted ____ kilos.	2
Brush, scrubbing ____ no.	1	*Pan, frying, steel* ____ no.	1
Can openers ____ no.	2	*Pans, mess, agate ware* ____ no.	2
Cleaver ____ no.	1	*Pan, sauce, steel, tinned inside, with cover* ____ no.	1
Cookbook, Army ____ no.	1	*Plates, dinner, agate ware* ____ no.	6
Cups, coffee, agate ware ____ no.	6	*Pot, coffee, agate ware* ____ no.	1
Cup, large, agate ware ____ no.	1	*Pot, tea, agate ware* ____ no.	1
Dipper, agate ware ____ no.	1	Rope, 6-mm ____ meters.	15
Grater, nutmeg ____ no.	1	*Sickle* ____ no.	1
Gridiron ____ no.	1	*Spoon, basting, agate ware* ____ no.	1
Hatchet ____ no.	1	*Spoons, table* ____ no.	6
Kettles, steel, nested, with covers ____ no.	3	*Spoons, tea* ____ no.	6
Knife, butcher ____ no.	1	*Steel* ____ no.	1
Knife and fork, carving, of each ____ no.	1	*Towels, crash* ____ no.	6
Knife and saw, combined ____ no.	1	*Tray, metal, japanned* ____ no.	1
Knives and forks, of each ____ no.	6	*Tumblers, agate ware* ____ no.	6
Ladle, agate ware ____ no.	1	Wire ____ coil.	1
Lantern, candle ____ no.	1		

297. CONTENTS OF FOOD CHEST, OLD PATTERN.

Beef extract or an equivalent preparation.	*Tins for the following articles:*
Candles.	Beans.
Condensed milk, in original cans, 4 kilos.	Butter.
Soap.	Coffee.
Vinegar, in 1-liter wicker-covered bottles, 2 bottles.	Salt and pepper.
Yeast powder, in ¼-kilo. original cans.	Sugar (2 tins).
	Tea.

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Numbers in bold-faced type refer to paragraphs in this Manual; the letters A. R. and numbers following refer to paragraphs of the Army Regulations; "obs.," obsolete, or superseded by improved articles.

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